

## **MID MICHIGAN SURGEONS** **FINANCIAL POLICY AGREEMENT**

***We appreciate the opportunity to provide our medical services for your health care needs. The following is our Financial Policy which we require you to read and sign prior to your first appointment.***

### **Office Payment Policy:**

***Co-pays are due at the time of your appointment.*** Your insurance policy is a contract between you and your insurance company and as part of this contract, co-payments are required to be paid at the time of your visit. Also, any current balances due will be collected at the time of your appointment. You may be required to reschedule any routine or non-urgent appointment if you fail to pay at the time of service. We accept cash, check, VISA, MasterCard, and Discover cards.

Please be aware that some, and perhaps all of the services provided may be non-covered services and your insurance company will determine what benefits are payable once a claim has been submitted. You are ultimately responsible for the bill in its entirety.

Monthly statements are mailed at the beginning of each month. Payments are expected within that calendar month. If payment is not received after the first two statements, you will receive a courtesy letter and time to respond, before your account is sent to an outside collection service.

We make every attempt to work with our patients who may have difficulty paying their outstanding balances. To inquire about payment arrangements, please contact our Billing Department at 517-332-0200, ext 235.

### **Adult and Minor Patients:**

Adult patients age eighteen and older are responsible for their own bill. A patient age seventeen or younger is considered a minor and the adult accompanying the patient and the parents are financially responsible for the account. In the event the parents are divorced, both may be financially responsible, regardless of the divorce decree.

### **Form Completion Policy:**

Our office receives many requests for various forms completion which can be very time consuming. The office will attempt to complete forms within five business days. There is a \$20.00 fee for completing disability, FMLA and other lengthy forms. This fee must be paid in advance. This fee does not apply to handicapped parking forms and return-to-work forms.

### **No-Show Policy:**

We attempt to contact every patient to remind them of their appointment; however, it is the responsibility of the patient to arrive for their appointment. We request a courtesy call 24 hours in advance if you are unable to keep your appointment; this allows for other patients to be seen. Patients who do not contact us prior to a missed appointment may receive a **\$25.00** no-show charge.

### **Medical Record Copy Request:**

We will release copies of a patient's medical record only with written, signed patient authorization. As a courtesy to you, no charge is assessed for your first request of copies of your medical records. Any additional personal requests will be charged at \$1.09 per page for the first 20 pages, \$.55 per page from 21 -50 pages, and \$.23 per pages above 50 as stated in the Michigan Medical Records Access Act. If a copy of a medical record is required by other than the patient, an initial service fee of \$11.95 may also be assessed.

***I have read and understand the Financial Policy of Mid Michigan Surgeons. I agree to abide fully to the terms listed above.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date