



Medical Care Financial Policy

Thank you for selecting Laser Skin Care Center for your dermatological care. We are committed to providing the highest quality care for our patients. Please understand that payment of copays, co-insurance and deductible is expected at time of service. This is considered common practice among medical providers as insurance policies change and deductibles are more common. As the landscape of medical care and insurance changes, we must adapt to it. We are able to access patient deductibles and verify how much of your deductible has been met and may request a deposit toward any remaining patient responsibility

Insurance Coverage: Please note that our eligibility checks simply verify that your insurance coverage is active and helps verify your copays and remaining deductibles. Eligibility checks do not confirm that we are “In Network” with your insurance carrier. Insurance carriers have multiple plan types and we cannot guarantee that we are in network with every plan. Please check with your insurance carrier to verify we are in network with your specific plan. Your insurance coverage is an agreement between you and the insurance carrier, and it is your responsibility to know and understand your plans requirements and policies regarding co-pays, co-insurance, deductibles and benefits. You are responsible for providing your current insurance information at each visit. You, as the insured, are responsible for understanding your insurance benefits; therefore, you will be responsible for any services denied by your insurance carrier as not reimbursable by your insurance plan.

Co-Payment, Co-Insurance & Deductibles: With all health insurance, a co-pay is a fixed amount you pay at the time of your visit. Co-Pays differ from co-insurance (the percentage you pay for covered services after reaching your deductible). Each insurance carrier treats co-pays, coinsurance and deductibles differently, so it is important to understand your own plans specific benefits and out of pocket responsibilities. Most plans have some type of co-pay, coinsurance and deductible and we recommend you contact your insurance carrier to gain a thorough understanding prior to your visit. Your insurance company will also send you an Explanation of Benefits (EOB) with the breakdown of their payment to our practice and your financial responsibility. All copayments are due prior to seeing the physician. We will estimate your Co-insurance and deductible responsibility, and this will be due after seeing the physician. As this is only an estimate, after your claims have been settled, there may be an additional balance or refund due. If unable to pay, your appointment will have to be rescheduled.

Forms of Payment Accepted: For your convenience, we accept Cash, Personal Checks, Visa, MasterCard, American Express, Discover and CareCredit.

Payment Plans: Laser Skin Care Center does not itself offer financing for patient copays, co-insurance, deductibles, retail or cosmetic procedures. We do accept various CareCredit promotional offers including “No Interest” if paid in full within 6 & 12 months*

The promotional offers we accept are subject to change. Please inquire for more details or an application.

*Subject to credit approval; Qualifying minimum purchase of \$500 is required for the 6-month plan. Qualifying minimum purchase of \$2,000 is required for the 12 month plan.

Medicare: Our providers are Medicare participants. Medicare will pay 80% of the allowable charges after you pay for your annual deductible. You are responsible for any amount applied to your deductible and 20% coinsurance. If you have secondary insurance, as a courtesy we will submit a claim for reimbursement. You will be responsible for any services denied by your insurance carrier as not medically necessary and/or not covered.

Managed Care Plans: In order to see a specialist, some insurance plans require a referral from the primary care provider (PCP) or a precertification before treatment can be rendered. If your insurance carrier requires a referral from your primary care physician, this must be present at the time of service. It is the patients responsibility to ensure we have this referral or precertification PRIOR to the visit. If we do not receive the necessary referral or precertification, the patient will be responsible for payment or will need to reschedule their appointment. **It is your responsibility to keep track of the referral expiration dates and the number of visits authorized by your insurance carrier.**

Laboratory: We are pleased to have an onsite Dermatopathology lab and a board certified Dermatopathologist as part of our practice. This enhances the care that we are able to provide to you when performing an excision and/or biopsy. In some cases, a specimen may need to be sent to an outside lab to perform further testing to get a better view of the pigment producing cells in the skin tissue. This is often done when there is a clinical concern for an abnormal mole/melanoma or atypical pigmented lesion. The outside lab will bill you separately.



Self-Pay Patients: We accept patients without medical insurance. Payment is expected at the time of service.

Returned Checks & Collections: A charge of \$25 will be made for all returned checks.

Cancellations/No Show: Missed appointments prevent access for other people who may be waiting for a dermatology appointment. A patient who fails to show up for their appointment without prior notice will be considered a no show. Our office requires 24 hours' notice for rescheduling or cancelling an appointment to allow the appointment slot to be available to another patient. Late "same day" changes do not allow adequate time to schedule with another patient and will be considered a "no show". If an appointment is not cancelled at least 24 hours in advance, you will be charged a \$50 fee for an office visit, \$75 for a procedure appointment and a \$200 fee for Moh's surgery. This fee will not be covered by your insurance company.

Deposits: Depending on your insurance plan, a deposit may be required to schedule certain procedures with the balance due in full at the time of service.

Statement Fees: Laser Skin Care Center reserves the right to charge a \$5.00 monthly statement fee for each account delinquent for 60 days or more.

Collections: Should it become necessary; Laser Skin Care Center may send its delinquent accounts to a collection's agency. The patient is responsible for any and all fees/expenses associated with the collection efforts on their account, including, without limitation, reasonable attorneys' fees, legal and other court costs, collections charges, fees, expenses and interest.

Forms Completion: On occasion, patients may request Laser Skin Care Center to complete certain forms/letters that may be required to assist you with your healthcare needs. Our staff will be happy to help complete these forms and write letters as necessary, upon your request. Be aware that this can be a labor intensive and time-consuming process, so please allow 7-10days for completion of requested forms/letters. Laser Skin Care Center will collect an administration fee of \$25 at the time the form is presented to our office.

Thank you kindly,
Laser Skin Care Center

Patient Name: _____ **Signature:** _____