

MidState
PULMONARY

Breathe. Sleep. Heal.

FINANCIAL POLICY

- The office staff will file all claims with the patient's insurance carrier(s). However, it is the **patient's responsibility** to ensure that the insurance carrier(s) our office has on file is accurate and current. If your insurance carrier changes and you fail to notify the office of this change, you as the patient will be responsible for the account balance.
- If the patient's insurance requires a co-pay, it is due at the time of service. The office cannot bill a patient for a co-pay.
- There is a \$30.00 fee for returned checks. If a check is returned, this office can no longer accept a check as a form of payment.
- There is a \$25.00 fee for employer, agency, disability, and any other type of paperwork that must be completed by a physician.
- There is a \$20.00 fee to obtain a copy of a patient's medical records.
- This office requires patients to give a 24-hour notice before cancelling an appointment for a non-emergent reason.
- There may be a \$25.00 fee for failing to give a 24-hour notice when cancelling an appointment. The office cannot bill a patient's insurance carrier for a missed appointment fee, and this fee must be paid prior to re-scheduling a missed appointment.
- The physicians will not refill medications if an appointment is missed or cancelled for a non-emergent reason. Additionally, the office cannot refill any medications after hours or on the weekends.

Patient Signature: _____ Date: _____

Revised 3.14.2023