

# Financial Policy

## **Insurance**

We cannot file your insurance unless all of your insurance information is given at the time of your visit. It is therefore necessary for us to have a current copy of your insurance card for accurate billing. Insurance benefits will be verified by our office, but it is recommended that you educate yourself about your individual benefits by contacting your insurance company before being seen. It is required that we hold you responsible for your portion of the charges, including copays and deductibles, at the time of service. If your insurance company has not paid a claim within 60 days, you may receive notification in the mail requesting your assistance in determining if there is a problem, or if additional information is required in processing the claim.

## **Authorization of Payment and Release of Information**

I request payment of authorized insurance benefits be paid to Skin Cancer Specialists, P.C. & Aesthetic Center, and authorize release of medical information to determine payable benefits for services rendered.

## **Authorization to Keep Credit Card on File**

I hereby authorize Skin Cancer Specialists, P.C. & Aesthetic Center to keep my debit or credit card information on file for payment and to initiate appropriate payment entries against my debit, credit card, or bank account as applicable, as amounts are owed by me on the patient account. I acknowledge that the initiation of all such entries to make payments on the patient account must comply with the provisions of U.S. law and any applicable state laws. I understand and agree that these entries may be made to my debit, credit card, or bank account as applicable, periodically to pay amounts owed by me on the patient account. I also agree to notify Skin Cancer Specialists, P.C. & Aesthetic Center if my debit or credit card information changes for any reason. This authorization shall remain in effect until I communicate to Skin Cancer Specialists, P.C. & Aesthetic Center my intention to cancel this authorization by calling the business office at (770) 422-8815.

## **Non-Covered Services**

There are a number of services we provide that are typically considered "cosmetic" by your insurance company. For example, removal of some benign growths such as skin tags are not routinely covered by health insurance plans. Other services, such as Botox, fillers, chemical peels, and laser, are also considered not medically necessary. Full payment for all non-covered services must be made at the time of your visit.

## **Referrals**

Since we are a dermatology office in the state of Georgia, referrals are not usually required. If your insurance company does require a referral, it is solely your responsibility to obtain a current referral for office visits. A valid referral must be received at least 48 hours prior to your appointment, or you may be asked to reschedule.

**(OVER)**

## **Labs**

If you are aware that your insurance carrier requires you to utilize certain labs for blood work or biopsies, you must inform your nurse. There are charges related to the laboratory itself, and these charges are separate from our office charges. You will receive an explanation of benefits (EOB) from your insurance carrier. Unless otherwise notified, your specimen will be processed by the Dermatopathology department of Skin Cancer Specialists, P.C. Each specimen will be examined in our full service laboratory by one of two board certified Dermatopathologists. As a result, you may receive two statements – one for your office visit and one for laboratory services.

## **No Shows**

As a courtesy, we attempt to contact every patient to remind them of their appointment; however, it is your responsibility to arrive for your appointment on time. Cancellations must be received greater than 24 hours in advance. Any patient who no-shows or cancels his or her appointment with less than a 24 hour notice possibly may not be able to reschedule or may be charged a \$100 refundable deposit in order to schedule any future appointments. This charge cannot be billed to your insurance company. This charge will be held until the claim for services rendered is paid in full by your insurance company, and any amount left over will be refunded to you. The \$100 will not be refunded for no-shows or cancellations within 24 hours.

## **Cosmetic Deposits**

A non-refundable cosmetic deposit may be required for certain services. Cancellations must be received greater than 24 hours in advance. Any patient who no-shows or cancels his or her appointment with less than a 24 hour notice may forfeit their deposit.

**Thank you for reviewing our policies. Please let us know if you have any questions or concerns.**