

## FINANCIAL POLICY of Honet Dermatology and Honet Cosmetic

It is the policy of **Honet Dermatology and Honet Cosmetic** (Linda C. Honet, M.D. Dermatology, P.C.) to have a **Financial Policy** that clearly outlines patient and practice responsibilities. We are committed to providing our patients with the best possible medical care while minimizing administrative costs. This Policy has been developed with these objectives in mind, and to avoid any misunderstandings or disagreements concerning payment for professional services.

### **Please read the following carefully:**

For patients who do not have insurance:

- Patients who do not have any insurance coverage are expected to pay for services rendered at the time of the visit.

For patients receiving cosmetic consultation, cosmetic procedure, and/or cosmetic treatment:

- Patients are expected to pay in full for all cosmetic services rendered at the time of the visit.

For patients who are currently covered by insurance (non-cosmetic care, treatment, and/or services):

- The patient is responsible to provide us with valid health insurance information and should bring his/her insurance card to each visit.
- Our office participates with numerous insurance companies and managed health care programs. For patients that are members of one of these plans, our business office will submit a claim for services using a standard medical insurance claim form.
- Honet Dermatology and Honet Cosmetic may bill secondary insurances as a courtesy to our patients, but may not automatically do so.

*If you have a plan with which our practice participates:*

- The patient is responsible to pay any co-payment or any portion of the charges as specified by the plan at the time of the visit.
- Any medical services not covered by an individual's insurance plan are the patient's responsibility, and payment in full is due at the time of the visit. Patients should direct and address specific medical insurance coverage issues with the insurance company's member services department (telephone number is on insurance card).

*If you have a plan with which our office does not participate:*

- If a patient has insurance that we do not participate in, our office will file a claim upon request, but **payment in full is expected at time of service.**

*If you are covered by an HMO or Managed Care Plan:*

- The patient is responsible to pay any and all co-payment or any portion of the charges as specified by the plan at the time of the visit.
- The patient is responsible to ensure that **any required referrals** for treatment are provided to the practice at the time of visit. Non-emergent visits may be rescheduled, or the patient may be financially responsible due to the lack of the referral.

Other:

- The office reserves the right to charge for the completion of forms. For example, these may include insurance, disability, insurance medication programs, and/or the copying of medical records.
- Any outstanding patient balance(s) that is/are not paid in full will be transferred to an outside collection agency, processing fees, postage fees, and other fees of which will be incurred by the patient.



## **NOTICE OF FINANCIAL POLICY ACKNOWLEDGEMENT**

I HAVE REVIEWED AND RECEIVED A COPY OF HONET DERMATOLOGY's and HONET COSMETIC's NOTICE OF FINANCIAL POLICIES AND PROCEDURES.

SIGNATURE\_\_\_\_\_

PRINT NAME\_\_\_\_\_

DATE\_\_\_\_\_