

Braddock Finnegan Dermatology

7911 West Center Road

Omaha, Nebraska 68124

Telephone: (402) 390-0333 Fax: (402) 390-9632

www.braddockfinnegan.com

FINANCIAL POLICY

We are extremely pleased that you have chosen us for your dermatological needs. This information regarding financial matters will be helpful to you in understanding our billing process.

1. Braddock Finnegan Dermatology P.C. files insurance claims for patients as a courtesy. Regardless if the patient has an insurance plan, the patient still has full responsibility for payment of the bill. It is also the patient's responsibility to know if the provider he or she is seeing is a participating provider with his/her health plan.
2. The "patient balance" is due within 15 days of the statement date unless you have made other arrangements with the business office. We will collect all outstanding patient balances prior to each visit.
3. Co-payments are always due at the time of service. Our contractual agreement with your carrier prevents us from waiving your required co-pay amount. If you have a remaining deductible with your carrier, we may ask for a \$100 deposit prior to receiving services.
4. If you have no insurance coverage, payment in full is due at the time of services.
5. Payment for cosmetic services or purchases will be required at the time of service and will not be filed with your insurance company.
6. We accept CASH, CHECKS, VISA, MASTERCARD, DISCOVER and AMERICAN EXPRESS.
7. A \$40.00 service charge will be assessed for returned checks.
8. Pathology services — if you have a biopsy taken, you may be billed separately for processing the slide and/or interpreting the slide. In some cases, a second opinion may be required to make a final diagnosis. Your insurance company may assess an additional co-payment for any lab or pathology services.
9. Laboratory Services — if you have blood drawn you may be billed separately by the laboratory that conducts the test(s). If your insurance company requires a specific laboratory for the processing of your blood work, it is your responsibility to notify the clinical staff at the time of the blood draw.
10. If you cannot pay in full at time of service, please call the business office at (402) 390-0333 to make other arrangements. Payments plans are determined by the amount of the owed balance. The following guidelines will be followed:
 - * Balances up to \$300 are to be paid in 3 monthly installments.
 - * Balances up to \$600 are to be paid in 4 monthly installments
 - * Balances greater than \$600 are to be paid in 6 monthly installments.
11. Call to correct any billing errors promptly. If you ignore our billing statements or telephone calls, we can only assume that you do not intend to pay for the medical services that were provided in good faith and your account will be forwarded to an outside collection agency.
12. Referrals — some insurance plans require that a referral from the primary care physician be obtained prior to be seen. It is the responsibility of the patient to obtain this referral. If a referral has not been obtained you may be responsible for a larger portion of your bill.
13. Personal Injury — we will not be a party to any litigation suits filed for personal injuries. We require payment in full and any payment from litigation is to be sought by you for reimbursement.

14. Credit Card on File -- Braddock Finnegan Dermatology, P.C. has implemented a policy that enables you to maintain your credit card information securely on file. In providing us with your credit card information, you are giving Braddock Finnegan Dermatology, P.C. permission to automatically charge your credit card on file for your co-pay/co-insurance, outstanding balances, services, and/or products.

Co-pays and Deductibles: Co-pays are due at the time of the office visit. If you have a remaining deductible with your insurance company, we may ask you for a \$100 deposit prior to receiving services. You may still choose to make your payment by check, cash, or a card different from the credit card on file.

Outstanding Balance: If your insurance provider has paid their portion of your claim and there is still an outstanding balance owed, Braddock Finnegan Dermatology, P.C. will notify you with two statements by mail. If the balance is not paid in full within fifteen (15) days of the second statement, any balance owed will be charged to your credit card. A copy of the charge will be mailed to you. This in no way compromises your ability to dispute a charge or question your insurance company's determination of payment. If you cannot pay in full, please call the business office at (402)390-0333 to make other arrangements. Payment plans are determined by the amount of the owed balance.

Services and Products: Self Pay services and other fees are due at the time of the office visit.

This card will only be authorized for the use of the credit cardholder. This agreement will expire upon termination of services and settlement of the final balance. The cardholder may also revoke this consent at any time in writing while understanding that continued services may not be available if an unpaid balance accrues.

I have read this policy and accept the terms as outlined above.