

# *Braddock Finnegan Helget Dermatology, P.C.*

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## **FINANCIAL POLICY**

We are very 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 and policy.

1. Braddock Finnegan Helget 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 for services rendered. 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. Braddock Finnegan Helget Dermatology, P.C. requires and enables you to maintain your credit card information securely on file in our encrypted electronic medical record. Patients who decline to store a credit card on file may not be seen for their appointment. In providing us with your credit card information, you are giving Braddock Finnegan Helget Dermatology, P.C. permission to automatically charge your credit card on file for your co-pay/co-insurance, outstanding balances, services, and/or products. Please note that this credit card on file policy will not compromise your ability to dispute a charge or your insurance company's determination of payment. This card will only be authorized for the use of the credit cardholder on the patient account it was applied to. The cardholder is personally responsible for keeping the credit card information current. 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 remains.
3. You will receive a statement showing the "patient balance" due once your claim has processed through insurance. This balance is due in the full 15 days after the statement date unless you have made other arrangements with the billing office. 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 "patient balance." If you are making monthly payments on past medical "patient balance" you will be able to schedule future medical appointments.
- 3a. Any outstanding "patient balance" that remains 15 days after the second mailed statement will be charged in full to the credit card on file. In the event a credit card on file declines the following policy will be enforced. Any outstanding "patient balance" 15 days after the second statement will be sent through our collections process. Once in collections, Braddock Finnegan Helget Dermatology P.C. will require the outstanding "patient balance" to be paid in full before scheduling another appointment. You will be required to have a credit card on file and pay a \$100 deposit prior to scheduling another appointment. Failure to make any payments for "outstanding balances" in a collections status may result in termination from the practice.
4. Co-payments are always due at the time of service. Our contractual agreement with your insurance carrier prevents us from waiving your required co-pay amount. If you have a remaining deductible with your insurance carrier, we may ask for a deposit prior to receiving services.
5. If you have no insurance coverage, a \$200 self-pay deposit is due at the time of medical services. Any remaining balance will be billed to the patient or responsible party. If services did not exceed \$200 the patient or responsible party will be reimbursed the remaining balance by check.
6. Full payment for cosmetic services or purchases will be required at the time of service and will not be filed with your insurance company.
7. We accept CASH, CHECKS, VISA, MASTERCARD, DISCOVER and AMERICAN EXPRESS.
8. A \$40.00 service charge will be assessed for returned checks.

9. Pathology services — 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.

10. 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.

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 being 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.

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