

**Woman Care OB/GYN Policy and**  
**FINANCIAL RESPONSIBILITY AGREEMENT**

We invite you to discuss and ask questions regarding our services and policies. The best health services are based on mutual understanding between provider and patient. **Your insurance policy is a contract between you and your insurance company. We are not involved in that contract. Our relationship is with you, not your insurance company.**

- You are responsible for all charges incurred and for any balance not paid by your insurance at the time of your visit. Payment in full is expected at the time of the visit. Please bring a form of payment to your visit, we accept cash, credit/debit cards and checks.
- It is imperative to have current information so that we can process your insurance claims, retrieve records and access medical information on your behalf. We will copy your current, valid insurance card and current driver's license. Bring these items with you to **each** visit. **Let us know if there have been changes from your last visit.**
- It is essential that you know your insurance benefits and confirm your eligibility with your plan prior to your visit. Please contact your insurance company with any questions you have regarding your coverage. Full payment will be collected if no insurance information is presented. Your claim will be processed through your insurance company provided we have accurate and complete information. If your insurance company doesn't pay within 60 days, we will transfer the charges to you; therefore it is imperative you provide accurate information.
- Accounts not paid within 90 days will be turned over to a collection agency. It is much better for YOU and US if this does not happen. If your account is turned over to a collection agency a 35% collection fee will be added to the balance, due to the service fee charged to us from the collection agency. We also reserve the right to refuse general medical care if bills remain willingly unpaid.
- A finance charge will be assessed for each month a payment is not made on your account.
- If the patient is a **minor**, an adult **must** accompany the patient and take responsibility for payment, supplying insurance information and signing appropriate consent forms for any treatment.
- Pregnant patients must pay their portion of the amount due (deductible, coinsurance or copay) so that you are paid in full by 32 weeks of your pregnancy.
- If you make an initial appointment at our office and do not keep it, and do not cancel more than 24 hours in advance, there will be a \$25 charge. We save a 45 minute time slot for these important visits and this wastes valuable time for our doctors and staff.
- We charge \$25 for insufficient funds.
- There is a \$15 charge for medical records fee (if not sent to another care Provider) and for FMLA forms.
- Laboratory/Radiology/Tests: Lab or radiology balances are not included in the charge for your visit here, and you will receive a separate bill from the laboratory who analyzes the test. We do not submit these claims and you will need to call their billing department with any questions.
- Medicare and Medicare HMOs require you to sign the "Advanced Beneficiary Notice" in order for us to bill them for your visit and bill you for services they will not pay. This form will be given to you upon check-in.

I have read and understand the financial policies of Woman Care OB/GYN as outlined above. I authorize direct payment to be made to Woman Care OB/GYN for any and all medical or surgical services rendered. I also authorize the release of my medical records for healthcare purposes and to my insurance company for payment determination. Patient's failure to show for scheduled appointments, to follow physician instructions or meet financial obligations may be grounds for termination from the practice.

Signature of Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_