

### **Magnolia Dermatology and Aesthetics Financial Policy**

Thank you for choosing Magnolia Dermatology and Aesthetics as your dermatology care provider. Our primary mission is to provide our patients with outstanding medical care. Your clear understanding of our Patient Financial Policy is important to our professional relationship. Carefully review the following information and return this form with your signature and today's date. Please ask if you have any questions about our fees, our policies and/or your responsibilities.

You will be asked to fill out a new patient demographic form at your first visit. It is your responsibility to notify our office at your follow-up visit(s) if any demographic information has changed, as well as any necessary updates to your insurance and your credit card on file.

#### **Secure Credit Card on File Policy**

**Magnolia Dermatology and Aesthetics requires all patients to keep a credit or debit card on file to pay any out-of-pocket balance due after insurance has made payment to us, or for self-pay patients.**

After your visit, we will submit a claim to your insurance and await insurance payment. After we receive payment from your insurance and if insurance leaves a portion for you to pay, we will send you a statement for your out-of-pocket responsibility (examples are co-pay, deductible, co-insurance) and await your payment. If no payment is received from you 20 days after the date of the statement, we will charge the card on file the outstanding balance due. This card will be used only to charge the balance due on the patient's account for co-pays, co-insurance, deductibles, no-show fees, returned check fees, interest charges for overdue payments, payment plan installments and other fees listed in our Financial Policy and General Consent.

Itemized receipts will be sent to you for any charges made to your credit or debit card.

Self-pay visits must be paid in full at the time of service.

We do not physically store your credit or debit card information on paper or on our computers. We only see the last 4 digits and the expiration date of your card. Your card information is kept on file securely with Rectangular Health, our secure, cloud-based third-party HIPAA and PCI compliant electronic practice management software provider.

Please provide your credit or debit card to the front desk staff to enter into your electronic chart.

#### **Medical and Cosmetic Billing**

Both medical and cosmetic dermatologic services are provided in our office. It is important to understand that these services are billed separately and differently, even if you are seen for both medical and cosmetic reasons at the same appointment. Cosmetic procedures must be paid for in full at the time of service. Cosmetic services and services with our Aesthetician are not billable to insurance and payment is expected at the time of service. Treatment packages for laser or aesthetic services are nonrefundable and expire 12 months from date of purchase.

## Insurance

It is the patient's responsibility to provide Magnolia Dermatology and Aesthetics with accurate and current insurance information. It is the patient's responsibility to understand the terms and coverage provided under your insurance plan. Please check with your insurance company to ensure that your physician participates as a provider in your insurance plan or network. If we don't have confirmation of your insurance coverage, you, the patient, are responsible for any charges incurred at the time of your visit. If your insurance company does not cover services deemed necessary by your physician and you agree to proceed with these services, you are responsible for the payment.

Any co-insurance, deductible, out-of-pocket and co-pay amounts will be the patient's responsibility. The patient shall be responsible for paying any balance remaining after the application of any insurance at the time of the office visit. If any balance remains unpaid for more than sixty days after the office visit or date of service, your account may be referred for collection and you will be responsible for any collection charges or attorneys' fees relating to the collection of your account.

Please note it is the patient's responsibility to file reimbursement with their insurance company if insurance was not presented at the time of visit.

## Cancellation Policy

If you miss your appointment (no-show), cancel or change your appointment with less than 24 hours notice, you will be charged a \$50 fee to the credit card on file. This fee is applicable to all appointments scheduled at Magnolia Dermatology and Aesthetics. Any appointments that need to be rescheduled due to time conflicts must be done with at least 24-hours notice to accommodate patients on a waitlist.

By signing this form, I authorize Magnolia Dermatology and Aesthetics to charge any outstanding balances on my account to the credit or debit card kept on file. I acknowledge that I have received and reviewed Magnolia Dermatology and Aesthetics' Financial Policy.

Signature: \_\_\_\_\_

Name (Print): \_\_\_\_\_ Today's Date: \_\_\_\_\_

Staff Witness: \_\_\_\_\_

*For patients with financial hardship or other extenuating circumstances a payment plan can be worked out with the office.*