

Patient Financial Policy

Thank you for choosing **D&A Dermatology** 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. Please notify our office at your follow-up visit(s) if any of the information has changed.

All cosmetic procedures must be paid for in full at or before the time of service. All deposits are non-refundable and all product sales are final.

We require a credit card number on file for all patients.

We accept cash, checks, Visa, Master Card, Discover and American Express. Your bill might include office visits, destructive treatments, biopsies and other surgical procedures, injections, pathology, lab work or other charges. As a courtesy to you, we file your claims to your insurance company. Amounts not covered by your insurance are your responsibility. All co-payments must be paid at the time of your visit. If you are not prepared to pay your co-pay, your appointment will be rescheduled. Any balances that are not paid after **30 days** from the date on the billing statement will be charged to the credit card on file. There is a \$25.00 fee for checks returned due to insufficient funds. If you do not understand your statement or have questions regarding your balance, please feel free to contact our Billing Office at 847-730-3858 for clarification.

If you have blood work done as part of your visit, your blood will be drawn here in our office and sent out for processing to an outside lab (Quest Diagnostics). Please note that we charge for the actual blood draw, but you will also receive a separate bill from Quest Diagnostics for the specific lab tests performed. If you have questions about the cost of specific lab tests please contact Quest directly.

Insurance It is the patient's responsibility to provide the clinic with current insurance information-please bring your current insurance card(s) to each visit. If the insurance company you designate is incorrect, you will be responsible for payment for the visit or procedure. Our relationship is with you, not your insurance provider. Please check with your insurance company to ensure our provider participates with your network. Failure to honor any agreements may result in your account being placed with a collection agency.

Referrals If you have an insurance plan that requires you to have a referral to be seen in our office, it is your responsibility to obtain a referral from your primary care physician and ensure that our office has a current copy.

Minors The parent/guardian that signs this Patient Financial Policy will receive the billing statements for the minor and will be responsible for payment on the minor's account, regardless of who is the primary policy holder of the insurance.

No-show/cancellation fees If you miss your appointment (no-show) cancel or change your appointment with less than 24 hours' notice, you will be charged \$50.

Insurance Information Release Authorization I hereby authorize D&A Dermatology to release any information acquired in the course of my examination or treatment to my referring doctor and/ or my insurance company.