

Heartland Dermatology strives to ensure a clear understanding of our patient’s financial responsibility for the comprehensive services we provide. These policies apply to all Heartland Dermatology & Heartland Aesthetica locations. **All aesthetic and cosmetic services must be paid in full at check out. Balances for clinical, surgical, and pathological services and applicable non-medical fees are due in full within 30 days of the first statement date.**

COPAYS/DEDUCTIBLES/COINSURANCE: All copays are collected in full at the time of Check-In. Failure or refusal to pay will result in rescheduling your appointment. Heartland is contractually obligated with insurance companies to collect all copayment, deductible, and coinsurance amounts in full. Failure to do this on our part can be considered fraud. **Patient is responsible for knowing and understanding their insurance coverage including co-payment, referral requirements, deductible/coinsurance, and in-network benefits.**

INSURANCE BILLING: Heartland Dermatology utilizes a 3rd party billing company to file and appeal claims on patient’s behalf. To ensure timely and accurate claims, patients MUST provide the following at Check-In:

- Photo ID/Driver’s License
- Valid Insurance Card(s)
- Copayment Amount

Failure to provide accurate and up-to-date information could result in full patient financial responsibility for the visit. If insurance upholds denial of coverage after 90 days, the balance will be patient responsibility. **Services considered “not medically necessary” are NOT covered by insurance and the balance will be patient responsibility.**

REFERRALS & PRE-AUTHORIZATIONS: Some commercial and government (VA) insurances require a referral or pre-authorization prior to seeing a Dermatologist or receiving certain treatments and procedures. **Referrals and Pre-Authorizations are the patient’s responsibility to obtain PRIOR to their appointment.** Failure to obtain a required referral may result in insurance denial, and patient will be responsible for the total balance due.

SELF-PAY/NON-COVERED SERVICES: Patients who have insurance we are NOT in network with, or do not have health insurance are considered self-pay. **Self-pay patients must pay a \$50 deposit for each appointment.** Discounts are offered if the visit is paid in full at check-out, otherwise, the remaining balance is due within 30 days. An Advanced Beneficiary Notice is available and will be provided to Medicare patients as warranted by the provider.

PATHOLOGY: Some specimens may require special stains and/or second opinions from a third-party pathology lab. These services are billed separately to the patient and are not affiliated with Heartland Dermatology services.

NO SURPRISES ACT: Prior to receiving a treatment, HDC will produce a "Good Faith Estimate" for self-pay patients upon request. Patient must authorize/deny treatment after receiving the Good Faith Estimate from the provider.

NO-SHOW POLICY & NON-MEDICAL FEES DISCLOSURE: It is important for patients to arrive on-time for their scheduled appointments. Patients who do not show for their appointments are preventing others from receiving care. **All non-medical fees must be paid in full prior to scheduling future appointments.**

Insufficient Funds (NSF) Fee: \$35	Appointment No Show Fee: \$50	Surgical Appointment No Show Fee: \$100
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OUTSTANDING BALANCES/COLLECTIONS/PAYMENT PLANS: Patient balances which carry over 90 days are subject to collections. Heartland Dermatology will submit all balances over 90 days past due to a 3rd party collections company. Payment plans are available for balances over \$100. **Patients in collections or have delinquent payment plans will NOT be allowed to schedule future appointments until the active payment plan is current, collections balance is paid in full, or a payment plan is arranged.**

By signing below, I acknowledge I have read and understand the financial policy and agree to abide by its guidelines:

Signature of Patient or Guarantor

Date:

Printed Name of Patient or Guarantor