



Financial Policy

1. Our office accepts most insurance plans (Medicare, Medicaid, and commercial insurance). It is your responsibility to;
 - Bring your insurance card to every visit.
 - Be prepared to pay your copayment or minimal fee. Payment can be made by cash or check.
 - You will be billed for medical care not covered under your insurance company.
2. If you have insurance which we do not participate, our office is happy to file the claim upon request; however you are expected to pay the nominal payment. If you the patient do not have insurance they will be referred to a Application Assistor for assistance.
3. If you are unable to pay for necessary medical care, you may be eligible for financial assistance and receive a document based on your household income. Our clinic provides discounts based on a sliding fee scale to individuals who do not have insurance coverage or are underinsured. It is the patient's responsibility to bring all required documentation before we can provide a sliding fee application. Proper proof of income is the most current tax return, the most recent pay stub, most recent statement from social services (Award letter, etc.), FHWC self- attestation of income form, or a letter from the caregiver with explicit amounts of money that are given on a monthly basis. Sliding fee scale discounts will be based on the most recent Federal Poverty Index (FPI) guidelines. Patients lacking proper proof of income at the initial visit must provide this documentation within sixty (60) business days. The sliding fee discount will not be applied until proper proof of income is provided. Should this action occur, the patient will then be place in the full-pay (100%) category until income verification is provided unless other arrangements have been made with the Billing Specialist. Final determination of the eligibility and proof of income documents will be signed and reviewed by the Front Office Team Staff.
4. If the patient is a minor (18 years or younger), the parent or guardian must sign below unless patient is an emancipated minor (they may then sign for themselves). The parent or guardian of a minor is responsible for the nominal payment at the time of service and any services that may be billed.
5. If you have questions about your insurance or would like to set up a payment plan, we are happy to help you. Our Clinic staff firmly believes that a good provider/patient relationship is based upon understanding and good communications. Patients who have not made an attempt to make payment arrangements or pay toward outstanding balances within one year after date of service, may result in discharge.
6. Questions about financial arrangements should be directed to the Front Office Staff. Please sign that you have read and agree to this Financial Policy.

Signature of Patient or Responsible Party

Date