

# WOMEN'S HEALTH HORIZONS

MARK ANTOSH, MD

## Financial Policy

Welcome to **Women's Health Horizons**, the office of Dr. Mark Antosh, Lynn M Hickox CNM,MS, and Vanna A Reisman CNM, NP. The following is a statement of our financial policies regarding your care. If you have any questions regarding a bill that you receive from us, please do not hesitate to call our billing office at **(315) 432-1048**. Our billing office is available Monday through Thursday 9:00am - 5:00pm and Friday's 9:30am - 4:30pm.

### Insurance (excluding government plans such as Medicare):

If you have insurance that will cover a medical visit here in our office, we will bill your insurance company to receive benefits to assist in paying for your care so long as you comply with the terms of our financial policy. Provided that we participate with your insurance(s), we will bill your insurance company for the portion of the costs that they will cover. You are responsible for any remaining portion of the costs your insurance does not cover. We will submit claims for you provided that:

- at each visit we receive a copy of **ALL current insurance cards**
- the patient intake form is properly completed
- our financial policy is signed

**Your insurance company requires that you pay your co-pay, coinsurance or deductible at the time of your visit.** Your insurance requires us to collect this amount from you. This does NOT apply to government programs such as Medicare.

- We expect you to be prepared for your co-pay at the time of your visit. If you are not prepared to pay your co-pay a **one time fee of \$10 will be accessed** for each unpaid co-pay that is billed to you.
- Our office accepts cash, check, money order, VISA, MasterCard, and Discover. Payment is expected at EACH visit. **Our office reserves the right to reschedule your appointment if you are not prepared to pay your co-pay or any unpaid balance.**
- You will receive a bill for unpaid coinsurances, deductibles, or charges that are not covered by your insurance company. **If we do not receive payment or notification from you regarding your unpaid balance, a monthly charge of 1.5% interest will be accessed after 30 days and an additional \$10.00 billing charge will be accessed after 90 days.**
- **Women's Health Horizons** understands that unexpected financial difficulty can arise. Therefore, we encourage you to contact us as soon as possible to discuss payment options for your account. A payment schedule may be provided to you in the event of unforeseen circumstances. Any questions regarding billing and financial issues should be directed to the billing manager. They may be reached at **(315) 432-1048**.

Our office does not normally bill non-participating or secondary insurances. We submit claims to these insurance companies as a courtesy to you, our patient. **If you have a secondary insurance that was billed for a medical visit to our office and we have not heard back from them in 60 days, you will be billed for this portion.** You should contact your insurance company to find out why the claim has not been paid.

**Patients WITHOUT Insurance Coverage**

When you do not have any health insurance coverage for your visit, medical services rendered to you at that visit **must be paid in full at the time of your appointment.** Our office does provide self-pay, reduced cash rates to our patients without insurance coverage. In order to receive this reduced pricing, you are required to pay your visit in full at the time of appointment. For questions regarding these reduced rates please contact the billing office at **(315) 432-1048.**

**Referrals and Authorizations**

It is the **patients responsibility** to obtain referrals if your insurance company requires one. our office will be happy to assist you in receiving an authorization, but this is the patient's responsibility. If your visit requires a referral and one has not been acquired prior to your appointment, we may reschedule the appointment.

**Missed Appointment Policy**

Women's Health Horizons reserves the right to charge a patient for a missed appointment.

**\*\*\* FAILURE TO KEEP THE APPOINTMENT WITHOUT A 24 HOUR CANCELLATION NOTICE  
WILL RESULT IN A \$50 CHARGE. \*\*\*\***

**Patients who continually schedule and do not show for their appointment may be discharged from the practice.**

**Collections**

Women's Health Horizons will make every attempt to arrange a payment plan with you in the event of a balance. However, if we have not heard from you **within 45 days of a billing statement we may submit your account to collection.**

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PRINTED NAME

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SIGNATURE

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DATE