

Nandita Mainthia, M.D. F.A.C.O.G

Hitendra Hansalia, M.D. F.A.C.O.G

PATIENT FINANCIAL POLICY

There have been numerous changes in health care in the past few years, making it more difficult for us to receive payment for services that we provide. Therefore, the following list of guidelines that are necessary for us to enforce in order to continue to provide high quality care and make your visit as pleasant as possible.

PLEASE READ ALL INFORMATION AND SIGN YOUR ACKNOWLEDGEMENT OF READING THIS POLICY IN BOTH AREAS INDICATED ON THE FOLLOWING PAGE.

- 1. We will collect your copay, deductible, or coinsurance at the time of your visit. If you do not have your copay, deductible, or coinsurance, you will be charges a \$25.00 billing fee plus your copay. If you have any previous outstanding balances, you will also be asked to pay that amount in full unless previous arrangements have been made. Payments can be made in cash or credit/debit card. Medicare patients will be responsible for certain copays and deductibles as determined by Medicare program.
- 2. If all or part of the services provided by Cobb Women's Health, P.A. are to be covered by insurance, you must bring your current insurance card with accurate billing information with you to your appointment. If your plan requires a referral from your primary care doctor, you will need to obtain this prior to your visit. You will be responsible for any unpaid balances due to lack of information.
- 3. We will file your insurance claims for you. It is your responsibility to make sure we receive prompt payment from your insurance carrier.
- 4. If your insurance company denies payment for any reason, you will be asked to pay cash, money order, or credit/debit card. If you do not pay in a timely manner, your account will be placed with our collection agency and you will be responsible for the additional fees associated with this placement.
- 5. It is your responsibility to know what your insurance will or will not pay. You must let your doctor know if your insurance company will not pay for routine or well visits, laboratory test, injections, etc. Our doctors will make every effort to work with your insurance requirements; we will code your claim according to the diagnosis determined by your doctor.

SELF PAY PATIENTS: This category includes those patients with no insurance and those patients who have an indemnity plan and wish to file their own insurance. Payment for medical services is expected before the services are rendered. We accept cash, money order and all major credit cards. WE DO NOT ACCEPT CHECKS. If you will not be able to pay for services in full at the time of service, you must make payment arrangements prior to coming to the office. If you have no previous agreement with our office, payment in full prior to be seen will be expected. If payment is not possible, we may reschedule your visit. If you do not follow scheduled payment arrangements, your account will be placed with our collection agency. CBA Credit, Ellijay, GA. Hardship cases will be reviewed on an individual basis. **Please be advised that if a self-pay patient become eligible for Medicaid after her treatment has begun, this office reserves the right to bill as private pay.



Nandita Mainthia, M.D. F.A.C.O.G

Hitendra Hansalia, M.D. F.A.C.O.G

<u>APPOINTMENT CANCELLATION:</u> In the event you cannot keep your appointment, please call at least 24 hours prior to your appointment time to let us know. Failure to call and cancel prior to 24 hours before your appointment, means your account will be noted a "No Show". Should your account to be noted a "No Show", you will be charged as follows:

A \$25.00 fee for an office visit. Three consecutive "No Shows, or Same Day Cancellations", your doctor-patient relationship my be terminated and you could be asked to seek another physician for further medical treatment. We would then be available for sick appointments **only for 30 days** following the termination.

<u>DISABLILTY FORMS:</u> Our fee for completing disability forms, employer return to work forms, or Family Medical Leave Act forms is \$25.00. The fee will be due prior to completing the forms.

<u>PRESCRIPTIONS:</u> If you need to call our office for a prescription or refill, you will be directed to the nurse's line to leave a message, they will send a message to your doctor and they will get back to you within 24 hours.

<u>TEST RESULTS:</u> Test results can now be viewed on our Patient Portal. However, only normal results will be available on the Patient Portal after your doctor has reviewed them. Any test results that are abnormal, every effort will be made to inform you.

<u>FOR YOUR INFORMATION</u> Our practices' policy is to file claims to your insurance company electronically on the next business day following the date of service. If you have any questions regarding our financial policy, please direct your questions to our billing office at 1-504-930-4154 ext. 105.

PRINT PATIENT NAME	
PATIENT SIGNATURE OR RESPONSIBLE PARTY	
DATE	

. .