



HEALTH REACH

FINANCIAL POLICY

Welcome to HealthReach. Please take a few minutes to review the following information. We hope you understand our need of a financial policy is to help maintain lower charges for our customers. If you have any questions, please ask our staff.

We accept cash, debit cards, and most major credit cards for payment of your account.

HEALTH INSURANCE:

Your insurance policy is an agreement between you and your insurance company. Our relationship is with you and not your insurance company. Therefore, all charges are ultimately **your responsibility** regardless of your insurance status. It is your responsibility to know your insurance benefits. Where insurance is available, HealthReach will bill and allow a reasonable time for the insurance company to pay. You will receive an Explanation of Benefits (EOB). The insurance plan EOB will state any balance remaining to be paid by the responsible party. Balance of charges not paid by insurance within 90 days will be charged to the credit card on file. The responsible party on the patient account will receive one (1) notification after the Explanation of Benefits (EOB) from the insurance company is processed to the account. The credit card on file will be charged within 21 days from the date on the statement not to exceed the remaining account balance. Should for any reason, payment not be received, the responsible party will be billed for all charges and interest.

IF YOU HAVE HEALTH INSURANCE WITH WHICH WE PARTICIPATE:

- You must provide our office with your current insurance information.
- You must provide a copy of your insurance card.
- We will bill your insurance claim for you.
- We expect any required copay at the time of service.
- If you have a deductible that has not been met, it will be a charge of 125.00 at time of visit.
- We will retain a card on file to cover any amounts due after receipt of EOB from your insurance company showing your responsibility.

Where participating insurance is available, HealthReach will bill and allow a reasonable time for the insurance company to pay. Our receptionists can clarify with you whether we participate with your insurance plan.

IF WE DO NOT PARTICIPATE WITH YOUR INSURANCE PLAN:

- You will be provided with a superbill to send to your insurance company.
- You can get a HCFA 1500 form for your insurance, by contacting our billing service at 1-307-201-3360. Please allow at least two weeks following your visit, in order for all the needed information regarding your claim to be entered into their system.
- Payment is required at the time of service.

YOUR BILL WILL BE AUDITED BY CERTIFIED CODERS, CHANGES TO YOUR CHARGES MAY BE APPLIED.

I understand that this form is valid for today's visit unless I cancel this authorization through written notice to the healthcare provider.

YOUR SIGNATURE ON THE CONSENT AND CONDITIONS FOR URGENT CARE TREATMENT FORM IS ACKNOWLEDGEMENT THAT YOU HAVE READ, UNDERSTAND, AND AGREE TO THIS FINANCIAL POLICY.

Revised Date: 4/19/2019