

# SHEBOYGAN INTERNAL MEDICINE ASSOCIATES

## FINANCIAL POLICY

Sheboygan Internal Medicine Associates is dedicated to provide the highest quality, cost effective medical care individualized to the patient's personal needs and wishes. We realize that the handling of the financial part of your health care is important to you. Your insurance contract is between you and your insurance company. You are responsible for all charges not covered by your insurance company. As a courtesy to you, we will be happy to prepare and submit a claim to your insurance carrier. We accept payment by cash, check or credit card. Please review the section below that is applicable to you.

### **COPAYS**

All copays and past due balances are due and payable at the time of service. Please provide current copies of your insurance cards and notify our office of any changes in your insurance.

### **SELF-PAY ACCOUNTS**

Self-pay accounts are patients who are not covered by insurance or do not have an insurance card with them at the time of service. If you are a new patient to our practice you will be asked to pay \$300.00 at the time of service. If you are an established patient, you will be asked to pay \$200.00 at the time of service. This is just a down payment for your visit, as charges may exceed the original down payment, and balances need to be paid in full.

### **NO SHOW APPOINTMENTS**

Consistent no show appointments without notification are subject to a \$25.00 fee payable by you. Unpaid no show balances must be paid in full before a new appointment is scheduled.

### **COLLECTION AND BANKRUPTCY ACCOUNTS**

If your account is in collection or bankruptcy status, you will be a "cash only" patient. All services rendered will need to be paid in full at the time of service.

### **WORK COMP CLAIMS**

If you are filing a claim with workers compensation, you will be asked to furnish the billing information to our billing department at the time of service. It is the patient's responsibility to file a report of injury with their employer, without the billing information you will be considered a self-pay patient.

### **LIABILITY CLAIMS**

It is our practice that we do not submit claims to liability insurance directly, however, you may request a copy of your bill to submit to your liability insurance. The patient is responsible for liability claims and will be a self-pay account.

### **MEDICARE PATIENT**

We are a participating provider with the Medicare program. We accept Medicare assignment. You will be responsible for deductibles, co-insurance and non-covered services.

### **WISCONSIN MEDICAID PROGRAMS**

We submit claims to Medicaid programs with a proper identification card and verification of coverage. The patient is responsible for any co-payments and non-covered services. Co-payment are due at the time of service.

### **INSUFFICIENT FUNDS CHECKS**

Any checks made payable to our practice that are returned due to insufficient funds will be charged a \$40.00 fee.

The financial policy assists Sheboygan Internal Medicine in providing quality care to our valued patients. If you should have any questions or need clarification of any of the above policies, please feel free to contact our billing department at 920-452-6000. Our business office hours are Monday through Thursday from 8:30am to 4:30pm.