

FINANCIAL POLICIES FOR VALLEYCARE GASTROENTEROLOGY MEDICAL GROUP, INC.

Valleycare Gastroenterology Medical Group appreciates your confidence in choosing us to provide for your health care needs. Our services imply a financial responsibility on your part – an obligation to ensure payment in full of our fees. We would like to share our financial policies with you since a clear understanding of our financial policies is an important component of our professional relationship.

Methods of Payment

We will bill your insurance as a courtesy to you with a copy of your current insurance card, which must be presented at each visit. If you do not have your insurance card, payment is due at the time of service. For your convenience, we accept cash, check, credit and debit cards. **Returned checks:** there is a \$25 charge for checks returned by the bank for insufficient funds.

Participation with Insurance and Medicare

Valleycare Gastroenterology Medical Group participates with Medicare, as well as many PPO and HMO plans, which means we accept assignment of benefits. If payment is not received from your insurance carrier within our contract limits, any balance will be your responsibility.

Medicare: As a Medicare patient, you are responsible for your deductible and for the difference between the approved charge and the amount Medicare pays. If you have a supplemental insurance, we will bill your secondary insurance for you. Any remaining balance will be billed to you.

PPO Plans: As a component of our contracts, we collect co-payments for every visit/procedures. In addition we collect co-insurances (your portion for services as established by your insurance company), deductibles, and past due balances at the time of your service. Please note that we estimate these portions, and that you may receive a statement indicating that additional co-insurance or deductible portions may be due, based upon how your insurance company processes your claim.

HMO Plans: If you are insured through an HMO (Hill, Bay Valley, Affinity, or PAMF), a referral/authorization is required from your primary care physician. If we do not receive a referral, we will require payment at the time of service.

Our Contracted Payors: AARP, Aetna, Anthem Blue Cross, Blue Shield, Cigna, Great West, Health Net, Medicare, Pacificare, Tricare, Triwest, United Healthcare.

Self-Pay

Please talk to our billing department to make financial arrangements for your medical charges as they will need to be paid at the time of service. Scheduled procedures are required to be paid in full at least 3 days in advance of the appointment.

Missed Appointment Charge

We request 24 hours notice of cancellation of an office appointment and 48 hours for cancellation of a procedure. A cancellation fee of \$50 is charged if you do not notify our office in the time requested or you fail to keep your scheduled appointment/procedure.

Fees for Completion of Forms/Letters

There is a \$35 charge to complete forms/letters such as disability forms or Jury Duty letters.

I have read the Financial Policies of Valleycare Gastroenterology Medical Group, Inc. My signature acknowledging this is on my demographics forms.

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Disclosure of Ownership

Our physicians may have a financial interest in ambulatory surgical facilities for which they may refer you to. You are free to choose any facility you wish for obtaining services that we order or request for you. Our physicians are certified by the American Board of Internal Medicine and Gastroenterology.

Notice to Consumers

Medical doctors are licensed and regulated by the Medical Board of California.
Telephone number: (800) 633-2322 Website: www.mbc.ca.gov