This is to inform you of our updated billing practice in regard to receiving patient payments. Effective January 1, 2015, we will require a credit card or debit card to be on file with our office. Payment of charges that would apply to your unmet deductible will be required at each appointment. All cosmetic and medically unnecessary fees must also be paid at the time of service. These charges may be paid by check, cash or your credit card on file.

**Why the change?**
There are several reasons for this change. With the changing environment in healthcare, in particular the Affordable Care Act and High Deductible Health Plans, more responsibility of payment is being placed on the patient. In order to be sure that patient balances are paid in a timely manner, we will require a guarantee of payment on file in our office.

**What is a deductible and how does it affect me?**
An annual deductible is the dollar amount you must pay first out of pocket during the year for medical expenses, before your insurance coverage begins to pay.

**When does the deductible begin?**
Your deductible begins at the start of your plan year.

**When do I have to pay for services?**
Anytime you receive medical care, you will be expected at the time of service to pay either your co-pay that is due **OR** 75% of the estimated charges, or leave a credit card on file for payment due after your insurance company pays. How will I know when my deductible has been met?
You can call your insurance company at any time to check on how much of your deductible has been met. Some insurance companies have this information available online. Every time you receive medical services, you will receive notification from your insurance company with how much they paid or did not pay, and the amount that went to your deductible. This will be sent to you in an Explanation of Benefits. (EOB)

**How will I know how much you are going to charge me?**
You will receive a letter in the mail from your insurance carrier that explains how much of your office services they pay and how much you pay. This is called the Explanation of Benefits. This letter tells you exactly, according to your health insurance coverage, how much of your health care bill is your responsibility and how much is the responsibility of your insurance to pay.

**Then what?**
We will receive the same Explanation of benefits (EOB) that you do. Most insurance companies will send your EOB to you prior to us receiving our copy. It arrives about 10-20 days after your appointment has been billed. We look at each EOB carefully to see what your insurance has determined as your responsibility. The amount owed by you personally is what we usually will bill you for in your monthly statement.
Will you send me a bill to let me know what I owe?

All patients with insurance are required to keep a credit card on file. If you do not have a credit card, or you do not want to leave one, we will expect an estimated payment at the time of service. Either a co-pay that is due at the time of service or 75% of the billed amount for the visit will be expected. This may or may not be including any procedures or treatments done that arose out of your visit. Once we receive the EOB and have determined your financial responsibility for your services, we will send you an email telling you the amount and the date that the portion of your responsibility will be placed on your credit card. You will have one week to pay the bill. If payment is not received, then the balance due will automatically be charged to your credit card. If you decide you want to make a payment plan over several payments or several months, you may call our billing department and arrange it.

But wait, I’m nervous about leaving you my credit card information

We do not store your sensitive credit card information in our office. We store it on a secure website called a gateway, which is under complete, Level 1 Payment Card Industry Security Standards Council Compliance. Under HIPAA, we are under strict rules and guidelines in terms of protecting patient privacy and the credit card is considered protected health information.

What if I need to dispute my bill?

We will always work with you to understand if there has been a mistake. We will refund your credit card if we or if your insurance company has made a billing error. We will only charge your co-pay, the amount that we are instructed to by your insurance carrier, in the EOB they send to us, and amounts for services not medically necessary or for cosmetic services.

What if I have more questions?

Our staff is happy to speak with you about your account at any time.