

### Billing Policies

Plastic Surgical Specialists, PLLC participates with most of the insurance carriers within the area. These include:

- Aetna
- Independence Blue Cross
- Personal Choice
- Keystone Health Plan East
- Amerihealth
- Highmark Blue Shield
- Medicare
- Tricare
- United Healthcare
- Cigna
- Medical Assistance

And many other insurance companies.

If your insurance company is not listed above, please contact your insurance company to make sure our physicians participate with your health plan. If we do not participate with your health plan, you will be required to pay for your office visit at the time of service.

It is your responsibility to know if your insurance has specific rules or regulations, such as the need for referrals from a primary care physician, pre-certification, limit on outpatient charges, specific physicians and / or hospitals to use. You should be knowledgeable of any deductibles, co-payments, and coinsurance.

The payment of fees for services is the direct responsibility of the patient. Your health benefit plan involves an arrangement between you, the enrollee, and the insurance company, HMO or your employer. Your health benefit plan determines your coverage requirements and establishes the limit on your coverage for medical services based on what the insurance company determines is medically necessary. We will do our best to assist you with understanding your proposed treatment and in answering questions related to your insurance.

Upon arrival at our office, please be sure to provide us with your current insurance information. If you are enrolled in an HMO plan, such as Keystone Health Plan East or Aetna HMO, you must have obtained a referral from your primary care physician to be seen by one of our specialists. If we participate with your insurance company, we will automatically bill your insurance company for the services rendered. However, your "co-pay" is required at the time of your visit.

Some insurance plans also require that the insured pay a certain amount each year toward their medical expenses before they will cover any services. This is called a "deductible". If you have not met your deductible, you will be required to pay for services at the time of your visit or in advance of any scheduled procedure.

#### Payment Policy Schedule:

Co-payments: Full payment is due at the time of service.

Deductible and coinsurance: Full payment is due at the time of service.

Non-covered service: Full payment is due at the time of service.

Non-participating insurance plan; Full payment is due at the time of service.

#### Other charges / fees:

Return check fee                      \$35.00

We realize that medical care can become very expensive. If you have concerns about your ability to pay for services, we ask that you contact us for assistance in the management of your account.

\_\_\_\_\_  
Signature of Patient

\_\_\_\_\_  
Date