



Women's Cancer Care Associates Practice Policy

We are committed to providing you with quality health care. Because some of our patients have had questions regarding patient and insurance responsibility for services rendered, we have developed this office policy.

1. Insurance. We participate with most insurances, including Medicare. If you are not insured by a plan we do business with, payment in full is expected at each visit. Knowing your insurance benefits is your responsibility. Please contact your insurance company with any questions you may have regarding your coverage. If you fail to provide us with the correct insurance information, you will be responsible for the balance of a claim.

2. Copayments, co-insurance, and deductibles. All co-payments are due at the time of service. A service fee of \$10.00 will be charged for each co-payment not paid at the time of service. We may bill you for any insurance assessed deductibles and/or coinsurance. We ask that you pay this balance promptly.

For patients undergoing chemotherapy in our office, we will collect any estimated patient responsibility at the time of treatment. Our Finance Office will review this with you in advance.

3. Referrals. If your insurance plan requires a referral from your primary care physician, **you** are responsible for obtaining a valid referral and presenting it to our office at the time of service. If you do not have a valid referral, you will be required to sign a waiver of your insurance benefits and pay for the visit in full or reschedule.

4. Photo ID. All patients will be required to provide photo identification. Acceptable forms of ID include driver's license, non-driver's state issued ID, passport, or military ID card. This photo identification will become part of your confidential medical record. Please be prepared to present this identification at each visit to our office. In addition, our office staff will take a photograph of you to be placed in your medical chart. This photograph is for identification purposes only.

5. Slide Review. All new patients who have had a biopsy performed prior to being seen in our office may have their pathology slides reviewed by St. Peter's Hospital Pathology (Capital District Pathology Associates, PLLC). This service is usually covered by your insurance. If not, you will be billed. Please contact your insurance company if you have questions about this coverage.

6. Claims submission. If we participate with your insurance, we will submit your claims to your insurance carrier. Your insurance company may need you to supply certain information directly. It is your responsibility to comply with their request. If you do not comply, you will be billed in full for the services rendered.



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7. Nonpayment. If your account is past due, you will receive a letter and/or telephone call from our Finance Department reminding you of your balance. Please be aware that if a balance remains unpaid, we may refer your account to a collection agency. If you have trouble paying your bill, or have other questions, please call our Finance Office at (518) 694-8264. We will work with you if we can.

8. Missed appointments. Our office makes automated reminder calls approximately 48 hours prior to your appointment. Our policy is to charge \$50.00 for missed appointments that were not cancelled with 24 hours' notice. These charges are not covered by your insurance company and will be billed directly to you. If you must cancel or reschedule a **new** patient appointment, you must contact our office at least 48 hours prior to your appointment. Failure to keep your new patient appointment will incur a \$100.00 fee.

9. Disability and other medical forms. The completion of disability and other supplemental medical forms require time to complete. Preparation of these forms may take up to 5 business days. There is a one-time \$20.00 charge for the completion of form(s). This charge is not covered by your insurance company and is payable by you prior to the completion of these forms. Completed forms will be returned to you.

10. Medical Records. You are entitled to copies of your medical records. If you want a copy for personal records or a copy faxed to another healthcare provider, you must complete a Medical Records Release form. We do not charge for these requests. Records requested for legal matters will incur a fee (as allowed by law). Please allow up to 10 business days for your request to be completed.

11. Telephone calls. While our providers are available 24 hours a day for medical emergencies or urgent concerns, all routine or non-urgent phone calls should be made during office hours. This includes prescription refill requests, questions about your appointment or bill, etc. We do our best to return all calls as promptly as possible.

12. Returned checks. Returned checks are subject to a \$40.00 service charge and may affect your privilege to pay by check at future visits.

Our practice is committed to providing the best treatment to our patients. If you have any questions or concerns, we will be more than happy to assist you.

Please contact our office at (518) 458-1390 if you have any questions.