

We accept Blue Cross of California, United Healthcare PPO insurance and Medicare plans only.

For billing inquiries please e mail our billing department: billing@drmarykerr.com

RESPONSIBILITY

Payment for medical services rendered to you is your responsibility. We will submit claims to Blue Cross PPO, United HealthCare PPO and Medicare insurance companies as a courtesy and will assist you to the best of our abilities with getting your claim paid. However, if your bill remains unpaid you are financially responsible for the amount due.

PATIENTS WITH INSURANCE WE DO NOT ACCEPT

You are responsible for the charges at the time of the visit. We will give you a superbill with codes for your visit. You will need to submit this to your insurance company for reimbursement.

INSURANCE CLAIM IS BILLED

If you have provided your current insurance information to our office on the day of your visit, we will file a claim directly with your insurance company for the services provided to you. Once your insurance company has paid toward you claim, we will then send you a statement for any unpaid balance due. If you have NOT provided insurance information, you are responsible for the charges incurred at the time of the visit. You will need to submit the superbill yourself for reimbursement. Please be aware most insurance companies will only allow 60-90 days from the date of service to receive claims.

CO-PAYMENTS / CO-INSURANCE / DEDUCTIBLES

You are REQUIRED to make your co-payment/co-insurance/deductible payment at the time of each office visit.

INSURANCE COMPANY PAYS AND A BALANCE IS DUE

After your insurance company pays your claim, we will send you a statement for the balance due, requesting prompt payment. You should receive an Explanation of Benefits statement from your insurance company detailing the amount paid and the amount you still owe.

INSURANCE COMPANY SENDS PAYMENT TO YOU

If payment is made directly to you by the insurance company for services provided and billed by us, you understand that prompt remittance of your total bill.

DELAYED PAYMENT

If we are notified from your insurance company that they require additional information from YOU to process your claim, you will need to respond to your insurance company promptly with the requested information. You will be billed directly for the full balance if you do not respond to the request in a timely manner.

DENIED CLAIMS

If you receive a Denied Claim Notice from your insurance company, you are responsible for paying for the services rendered. You will receive a statement advising you of the balance due and prompt payment is expected.

BILLING DISPUTE

If the dispute concerns the amount paid by your insurance company please call them directly to discuss the matter. If the dispute concerns the statement sent to you by us then please contact us as soon as possible. We will make every effort to assist you in resolving the matter. Under all circumstances you should stay in touch with us on a regularly basis to ensure that your account is not sent for formal collections action.

If formal collection procedures become necessary you will be responsible for additional costs incurred.

Print Name

Date

Signature