



## FEES & PAYMENT, & NO-SHOW POLICY

Thank you for choosing Vascular Solutions for your healthcare services. The following document outlines how we structure our fees and payment options. If you have any questions about charges, account balance or payment processing please contact our practice manager. We accept the following forms of payments:

- Visa
- American Express
- Cashier check
- Master card
- Personal check
- Cash
- Discover
- Money Order
- Care Credit\*

\* If you are interested in using Care Credit please contact the practice manager for additional information.

\*\* A copy of your driver's license (or other government-issued photo ID) is required for non-cash payments.

### COSMETIC PROCEDURES

You will be required to **pay in full** (at time of appointment).

### NON-INSURED (SELF-PAY PATIENTS)

You will be required to **pay in full** (at time of appointment).

### INSURED PATIENTS (OUT-OF-NETWORK)

You will be required to **pay in full** (at time of appointment). We will provide you with a "charge slip" outlining incurred charges and payments you have made. This "charge slip" can be submitted (by you, at your discretion) to your insurance company, if your insurance company accepts such documentation.

### INSURED PATIENTS (IN-NETWORK / PLAN ACCEPTED BY VASCULAR SOLUTIONS)

Co-payments, co-insurance, and any deductible are due at time of service. Vascular Solutions will submit claims directly to your insurance company. If your health insurance coverage has lapsed (ie. not currently "active") you will be required to **pay in full** (at time of appointment).

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## OVERVIEW OF COMMON CHARGES

### NEW PATIENT "OFFICE VISIT" CHARGE

Patients receiving initial evaluation at Vascular Solutions will be evaluated by a medical provider (MD &/or PA). With the exception of brief pre-sclerotherapy evaluation, there is a charge for this service.

### DIAGNOSTIC IMAGING CHARGE

Vascular Solutions performs a variety of on-site diagnostic imaging studies. Diagnostic imaging studies (typically duplex ultrasound) are required to define vascular anatomy, and determine treatment options. There is a charge for this service.

### RETURN PATIENT "OFFICE VISIT" CHARGE

Established patients returning for follow-up evaluation at Vascular Solutions P.C. will be evaluated by a medical provider (MD &/or PA). There is a charge for this service.

### IN-OFFICE SURGERY / PROCEDURE CHARGE(S)

A wide range of procedures are performed in the office at Vascular Solutions. Some procedures are performed by MD (eg. various venous ablation procedures, phlebectomy), some procedures are variably done by MD or PA (eg. venous sclerotherapy, wound debridement) and some "procedures" are billable activities that are coordinated within the office by appropriately trained nursing staff / clinical team-members (eg. dressing changes). Each procedure has an associated charge.



## SPECIAL CIRCUMSTANCES:

### OFF-SITE IMAGING

Occasionally patients will require off-site imaging (eg. CT scan) at outside facilities, that are not owned, operated or financially affiliated with Vascular Solutions. Charges for diagnostic studies obtained at such facilities will be generated by the facility performing the off-site diagnostic study. Vascular Solutions is not responsible for charges incurred at off-site imaging locations.

### HOSPITAL-BASED SURGICAL PROCEDURES & IN-PATIENT CARE

Patients who require "outpatient" procedural intervention (in a hospital or ambulatory surgery center), and patients who require inpatient care will be subject to various charges established by the treating facility. These charges may include (but are not limited to):

- Facility fees.
- Professional charges rendered by various professional providers at that facility.
- Professional charges / procedural charges related to the activity of Dr. Ford (or any provider employed by Vascular Solutions) rendered at that hospital / facility.

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## INSURANCE VERIFICATION

As a courtesy to our patients, prior to any planned billable event at Vascular Solutions we will make a good-faith effort to confirm the following:

- Verify you have a valid (active) insurance policy.
- Verify that your insurance is accepted by Vascular Solutions.
- Verify that proposed procedural services are covered by your insurance plan.

### INSURANCE BENEFITS QUOTE

Prior to any planned billable event at Vascular Solutions we will contact your insurance company to obtain financial information specific to your plan (co-pay, co-insurance, total deductible, deductible met, etc.) Based on this information Vascular Solutions will provide you with a "Benefits Quote", which will outline the cost of services and an estimate of the amount that you will be responsible for.

- This quote should be considered a **preliminary estimate**, and is **not a binding contract**.
- Vascular Solutions does not accept any responsibility if the information provided by your insurance company is inaccurate.

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## LEGAL DISCLAIMER

Billing your insurance does not guarantee payment by the insurance company, nor does it release you from financial obligation for any unpaid balance. Vascular Solutions is not responsible to negotiate a settlement for any disputed claim(s). In case of insurance partial payment, the residual balance is due by you.

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## BILLING NOTIFICATION PROCESS

Vascular Solutions P.C. will send you a billing statement detailing any unpaid balance. Outstanding balances are due (in full) within 30 days of the statement balance.

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## PAYMENT RESOLUTION

Balances over 120 days past due may be sent to a collection agency (unless other arrangements have been made).

- A **\$50.00** fee will be assessed on accounts placed in collections.
- A **\$25.00** service fee will be charged for returned checks due to insufficient funds.
- Should you fail to comply with any of the above policies Vascular Solutions P.C. reserves the right to discharge you from our practice.



## NO-SHOW POLICY

Vascular Solutions is committed to providing high-quality, efficient healthcare delivery.

We understand that unforeseen events may necessitate rescheduling of healthcare appointments.

Advance-notice of rescheduling requests (or appointment cancellation) allows us to effectively allocate practice resources.

To minimize the negative impact of last-minute cancellations & "no-shows", Vascular Solutions uses the following policies:

- If you fail to attend a scheduled office visit appointment (or cancel the appointment with less than 24-hours advance-notice) you will be subject to the following fee: **\$25.00**
- If you fail to attend a scheduled in-office surgical procedure (or cancel your appointment with less than 72-hours advance-notice) you will be subject to the following fee: **\$75.00**
- If you "no show" (or cancel with inadequate advance-notice) more than three times in a 12-month period you may be dismissed from the practice.

- ☐ I have been provided a copy of the Vascular Solutions Fees & Payment, & No-Show Policy and agree to the terms and conditions described in this policy.

Patient or Authorized Person:

Name (print):

Signature:

Date:

Affix Patient Demographic  
Sticker Here