

Dear Patient of Manhattan Dermatology,

In advance of your upcoming appointment, we wanted to notify you of an administrative change at the practice. Please note that for all charges going forward, you will not receive a billing statement from us. We now require a credit or debit card on file with our office. This is a requirement of most NYU doctors' practices.

Why the change?

There are several reasons. First, statements waste paper, stamps and envelopes. Second, we need to be sure that balances for which the patient is responsible are paid in a timely manner. Things are changing in healthcare, and it has become cost prohibitive for us to continue to bill both the insurance company and you, the patient, for each visit. In order for us to continue to participate in managed care and to accept our patients' insurance, we need to ensure that we have a guarantee of payment on file.

But I always pay my bills. Why me?

We have to be fair and apply the policy to all patients. We have wonderful patients, and we know that most of you pay your balances. Unfortunately, this is not the case every time.

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 visit they pay and how much you pay. This is called an Explanation of Benefits (EOB). 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 carrier.

Then what?

We receive the same letter you do. It arrives about 20 – 30 days after your appointment.

We look at each Explanation of Benefits (EOB) carefully, and see what your insurance has determined is your patient responsibility. This is the same way we normally determine how much to send you a bill for in the mail.

But wait, I'm nervous about leaving you my credit card.

We do not store your sensitive credit card information in our office. We store it in a secure site called a gateway. We access your information on this site only to process a payment.

Unlike some retail stores that have been featured in the news recently for data breaches due to skimping on protective technology, we follow the Payment Card Industry Data Security Standards to the

letter and will not compromise your data security. Medical practices are used to having to secure information under HIPAA laws, and we already have policies in place for any credit card information we come into contact with.

Keeping the patient's card on file, offsite, in an encrypted payment gateway enhances security because there are fewer human touches in the process that can invite fraud. If patients swipe their cards at every checkout for time-of-service payments, then their card data is exposed at every visit. If the card is handed to an employee to swipe, the card is exposed magnetically and it is exposed to another human being. With a credit card on file system, after the initial swipe the patient doesn't even have to bring the credit card to the next visit, or enter the PIN during the visit.

What if I need to dispute my charge?

We will only charge the amount that we are instructed to by your insurance carrier, in the same way that we normally determine how much to send you a bill for in the mail. We will always work with you to understand if there has been a mistake, and we will send you a refund if we have made an error.

What is a deductible and how does it affect me?

An annual deductible is the dollar amount you must pay out of pocket during the year for medical expenses before your insurance coverage begins to pay.

For example, if the policy has a \$500 deductible, you must pay the first \$500 of medical expenses before the insurance company begins to pay for any services.

This works just like the deductible for your car insurance or homeowner's insurance policy does.

When does a deductible begin?

Your deductible begins at the start of your plan year. Most plan years begin either January 1 or July 1, but plans can start on any date.

When do I have to pay for services?

Any time you receive medical care you will be expected to pay in full for your services until your deductible is met. If you have a very large deductible, called a high deductible insurance plan, you may have to pay out of pocket for most of your medical care.

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, and many 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 if the amount went to your deductible.

Will you send me a bill to let me know what I owe?

Manhattan Dermatology will no longer send patient statements. All patients are required to keep a credit or debit card on file, but we do not charge anything to your card except the balances that are your responsibility.

What if I have more questions?

We invite you to call our office and speak with our Practice Supervisor, who will be happy to answer your questions.

We look forward to seeing you soon and continuing to provide the highest quality dermatology care possible.

Manhattan Dermatology

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