

Financial Policy

Thank you for choosing The Women’s Specialists of Fayette, LLC as your healthcare provider. We are committed to provide the best Gynecology and Prenatal care possible. The following statement explains our Financial Policy which we ask you to read, sign, and return to us prior to your treatment.

Please Initial

___ Accurate and complete personal and insurance information has been provided prior to treatment with the physician.

___ All applicable copays, personal balances (both current & prior) are due at the time of service.

___ All referrals and or authorizations are patient’s responsibility to obtain in order to avoid being balanced billed.

___ Patient balances accrued over 60 days will be subject to an outside collection process. All costs incurred with this process will be patient responsibility.

___ Late arrivals exceeding 20 minutes may be asked to reschedule or if physician time allows, may be worked back into the schedule.

___ Our office requests 24 hour advance notice to cancel or reschedule an appointment.

It is important that you read and understand your insurance policy and its requirements for coverage. Please be sure that your provider participates and is contracted with your insurance plan. We file insurance claims for services rendered as a courtesy. Balances deemed “patient responsible” by your insurance plan are due immediately.

I have read and understand the Financial Policy for The Women’s Specialists of Fayette, LLC

Print Name

Signature

Date

Date of Birth