

## **FINANCIAL POLICIES AND PROCEDURES**

At Rheumatology Consultants of WNY, (RCWNY), we believe that all patients who are rendered care at this office deserve the best medical care that can be provided.

### **HEALTH INSURANCE**

It is your responsibility to provide us with your current insurance care at every visit so that we may bill the insurance company in a timely fashion. It is your responsibility to understand your insurance coverage. If your insurance does not cover the cost of your visit or procedure, you will be responsible for the charges for all services rendered.

We will file any and all forms necessary to see that you receive the full benefits of your coverage. Any balances not paid by the insurance company become the patient's responsibility to pay at that time.

If you carry a balance on your account during the time you present at our office, a payment on your account will be required at that time. RCWNY reserves the right to terminate any patient who misses a payment. Under unusual circumstances, we are willing to work out a personalized payment schedules if you so require.

### **PAYMENT OPTION**

We accept cash, check or credit cards, Mastercard, Visa, Discover and debit cards.

Co-pays are due at the time of service. There will be a \$10.00 additional fee added to any co-pays not paid on the day of service.

There is a \$25.00 charge for broken/cancelled appointments not allowing a 24 hr notice

### **ASSIGNMENT OF BENEFITS**

My signature will authorize assignment of insurance benefits to be paid to RCWNY. I authorize RCWNY to release any information necessary to insurance carriers regarding my treatment to be used to process insurance claims.

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Print Full Name

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Date of Birth

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Patient Signature

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Date