



# **MICHIGAN RHEUMATOLOGY & WELLNESS CENTER, PLC**

## **OFFICE FINANCIAL POLICY**

We participate with various insurance companies. We advise you to contact your insurance company in advance of treatment to inquire as to the extent of your coverage and any deductible that may apply. We electronically submit claims on the day of service and day of procedure completion. Co-payments, deductibles, and payment for services not covered by insurance are your responsibility and expected when you arrive for your appointment. We only accept assignment of insurance benefits when the insurance coverage can be positively confirmed.

**PLEASE NOTE THAT WE WILL ONLY PURSUE INSURANCE PAYMENT FOR 45 DAYS FROM START OF SERVICE. AFTER THAT, THE PATIENT WILL BE RESPONSIBLE FOR THE ENTIRE BILL, WHICH WILL THEN BE CHARGED TO YOUR CREDIT CARD WHICH WE WILL MAINTAIN ON FILE.**

**In the notes area below, please enter your card number with expiration date and card ID.**

- Patients will be billed in full for any service not covered by his/her/their health care plan. After receipt of benefits, any unpaid balance will be charged to your credit card. Patients' credit card information will be maintained on file. A receipt will be forwarded to the billing address.
- Any patient over the age of 18, or an emancipated minor, will be held financially responsible for all charges incurred. For minors, the parent who accompanies the minor for their first visit will be financially responsible for the child's care.
- Patients will be billed in full for NO SHOWS appointments. Balance will be charged to your credit card. Patients' credit card information will be maintained on file. A receipt will be forwarded to the billing address.
- Patients will be billed in full for cancelations made less than 24 hours from the appointment unless justifiable circumstances such as hospitalizations or natural disasters. Patients will have the option of switching to a telehealth visit same date and time to avoid charges. Balance will be charged to your credit card. Patients' credit card information will be maintained on file. A receipt will be forwarded to the billing address.

**METHODS OF APPROVED PAYMENT ACCEPTED ARE: CASH, PERSONAL CHECKS, VISA AND MASTERCARD. We also participate with CARECREDIT for those who qualify. REFUNDS ARE PROCESSED WITHIN 45 DAYS OF FINAL INSURANCE PAYMENT.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_