# ADVANCED DERMATOLOGY & SKIN SURGERY, P.A.

#### **OFFICE POLICIES**

Thank you for scheduling an appointment with Advanced Dermatology & Skin Surgery. We are committed to your treatment and wellbeing and will work hard to serve your needs. In order to make your visit as pleasant and productive as possible, please review our office and financial policies. **Your initials and signature are required prior to any treatment**.

## **What You Should Bring**

- Plan to arrive 15 minutes prior to your scheduled appointment time.
- A valid copy of your Insurance ID Card is required at the time of your office visit. If we are unable to verify your insurance information before you see the doctor, payment in full will be expected at the time of service.
- If your insurance requires an authorization for the visit, you must obtain this prior to arriving for your appointment.
- Completed Patient Registration and Medical History forms.
- A photo ID.
- A major credit card.
- Medical records related to your visit.

# Office Hours

The office is open Monday-Friday 8:00 AM-5:00 PM. On days of inclement weather please call the office before leaving for your appointment to hear a recorded message concerning whether the office will be closed or opening late.

#### **Emergencies**

Emergencies will always be given priority. During office hours, call (828) 274-4880; after hours call (828) 259-5008. Should a true emergency or serious situation arise after office hours call 911.

### **Prescriptions and Refills**

Prescriptions and refills are only issued during regular office hours before 4:00 PM. Calls received after 4:00 PM for routine refills will be handled the next business day.

## **FINANCIAL POLICIES**

#### Insurance

For each visit to our office, we will ask you to provide the information needed to verify your insurance coverage and file your insurance claim. It is your responsibility to understand your insurance plan coverage. You may wish to contact the number on the back of your card to review and verify your benefits. Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services or diagnosis codes which they will not cover. **Our office never guarantees that your insurance will pay for all services.** If, for any reason your claim is denied, or the payment from them is less than anticipated, you are responsible for the balance due on your account.

Initial

#### Co-payments, Deductibles and Coinsurance

A **copayment** is a dollar amount set by your insurance company which you are responsible for at each visit. A **deductible** is the amount you are obligated to pay before your insurance company starts paying for your healthcare costs. Some insurance plans may also have a **coinsurance**, in which you may be responsible for a percentage of healthcare costs in addition to your copay or deductible. Payment will be due at time of service if your deductible has not been met or if your plan requires a coinsurance payment. Should your insurance company notify us that additional payment over and above copayments, deductibles, or coinsurance is due from you, you will be billed for this amount.

- We may require a deposit to schedule certain procedures with the balance due in full at the time the procedure is performed. You will be notified of this prior to scheduling your procedure.
- All past due balances are required to be paid in full before new services are rendered. Prior balances and copayments may be collected at check-in.

# **Credit Card of File**

We offer a Credit Card on File program as a convenient method of paying for the portion of your services that your insurance policy requires you to pay such as copay, deductible, and co-insurance. We must have a signed authorization on file to charge your credit card. This program expedites the checkout process and enables us to process refunds on your account efficiently.

#### Refunds

Please allow 10-14 business days for refunds to be processed once an overpayment has been determined.

#### Medicaid

Medicaid patients must present a current Medicaid card and be prepared to pay any applicable copayments. If you do not bring your current Medicaid card and applicable co-payment, your appointment will be rescheduled.

## Self-pay

Patients who do not have insurance coverage are considered self-pay. Payment in full for services provided are due at the time of service for self-pay patients.

## **Laboratory and Pathology Fees**

It may be necessary to obtain a tissue sample (biopsy) or perform lab tests to confirm a diagnosis or determine a course of treatment. Advanced Dermatology & Skin Surgery has an on-site lab and pathologist who perform the slide preparation and interpretation of our patients' biopsy specimens. Fees associated with this service are separate from the procedure performed by your treating provider. You may receive an additional bill for lab services that are not paid by your insurance. Depending on specific factors, your provider may send the specimen to an outside lab for slide processing and interpretation. In those instances, patients or their insurance will receive a bill from the outside lab.

Initial

# **Cosmetic Services** (services that are not medically necessary)

Patients are responsible for all cosmetic procedure fees at the time of service. We do not bill insurance companies for cosmetic procedures. The cost of any procedure will be a separate fee from an office visit or consultation fee.

### Missed Appointments, Late Cancellations, & Non-Compliance

Please keep in mind that appointments are time-slots reserved specifically for you. We require a 24-hour advance notice if you are unable to keep your scheduled appointment. As a courtesy, we offer appointment reminder calls which will allow you to cancel or reschedule at that time. However, it is ultimately your responsibility to keep track of your appointments whether you receive a reminder call or not.

- Patients who arrive late may have to be worked in, or if you are more than 15 minutes late we will
  have to reschedule. If you are unable to keep an appointment please call us at least 24 hours in
  advance so we may use those times for other patients. If you do not keep your appointment, or if
  you cancel within 24 hours of your appointment, there will be a \$50 charge.
- Patients with repeat cancellations or missed appointments may be discharged from our practice.
- Please note that noncompliance with treatment plans (including medications and/or lab work) and abusive/inappropriate behavior towards staff and/or other patients will result in dismissal of your care from our practice.

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### **Minor patients**

A parent or guardian must accompany a patient under the age of 18 and are responsible for consent of treatment and full payment. Unaccompanied minors will not be treated.

#### **Methods of Payment**

For your convenience, we accept cash, personal checks, MasterCard, Discover, American Express, Visa and CareCredit. There is a \$25 fee for all returned checks.

# **Medical Records**

A signed authorization is required. Please allow us 72 hours to process your request.