

FINANCIAL POLICY

INSURANCE INFORMATION:

The patient is expected to present the insurance card at each visit. Insurance claims are filed to participating insurance companies. The patient is responsible for notifying our office of any changes in insurance coverage.

WORKERS COMPENSATION:

Patients covered with workers compensation must contact their employer and assigned caseworker prior to treatment. The patient must inform the office prior to the appointment if the visit is related to a work injury.

PATIENT BALANCE:

All co-payments, coinsurance, and deductible amounts are due and payable at the time of service.

SELF-PAY ACCOUNTS:

Payment in full is expected at the time of service for uninsured patients.

PAYMENT OPTIONS:

We accept cash, check, Visa, MasterCard, Discover and American Express. For specific billing inquires or to pay By phone with a credit or debit card please call (423) 437-8767. Payments can be mailed to P.O. Box 787 Jacksboro, TN 37757.

RETURNED CHECKS:

Checks returned for insufficient funds are collected by Neighborhood Urgent Care. A \$35.00 fee will be charged to your account for each returned check. A returned check that is not paid may result in dismissal from the practice.

DIVORCE CASES:

In cases of divorce, the individual who receives the care is responsible for payment of any patient balances at the time of service. We will not bill a divorced spouse for the patient's services. The responsibility for payment of services for minor children belongs to the guarantor. Statements will be mailed to the guarantor address. We cannot send statement to multiple addresses.

COLLECTION ACCOUNTS:

Unpaid patient balances may be sent to a third party collection agency at the provider's discretion.

PATIENT REFUNDS:

Refunds are issued to patients when an overpayment has occurred and there isn't any outstanding claim to insurance.