

Mona Ghosh, MD
Obstetrics & Gynecology

Financial Policy

Thank you for choosing us as your health care provider. The following is a statement of our Financial Policy which we require you to read and sign prior to any treatment. All patients must complete our Patient Information form before seeing the doctor.

Medical Insurance: We cannot bill your insurance unless you give us your current insurance information. Insurance Plans, where we are a participating provider; co-pays, and deductibles are due at the time of service. We accept payment by cash, check or credit card (Visa, Master Card, or Discover only and minimum payment by Credit Card is \$ 15.00)

In order to maximize your insurance benefits, it is important for you to know your insurance company's policies, restrictions or limitations regarding your health coverage particularly in the area of annual preventive check up, referral services, infertility, contraception, pregnancy, hospital admission and also your annual deductibles, co-payment and co-insurance payment. Many insurance companies require pre-certification, second opinions or primary care physician's authorizations. Our office will make every effort to comply with your insurance's policies; however it is your responsibility to make us aware of your specific policy regulations.

If your insurance company has not paid on your account within 60 days of billing, the balance will be changed to patient responsibility. If the account is not paid in full by 90 days after the date it becomes patient responsibility, the account will be assessed \$ 10.00 late fee each month that the balance remains unpaid and the no-compliant account will be turned over to collection agency after upon due notice.

Responsibility for Payment: Our practice is committed to providing the best treatment for our patients and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance companies' arbitrary determination of usual and customary rates. Adult patients are responsible for payment of their own accounts. The adult accompanying a minor or the parents/guardians of minor are responsible for payment of a minor patient's charges.

Missed Appointments; Unless cancelled 24 hours in advance, our policy is to charge for missed appointments. Please help us serve you better by keeping scheduled appointments.

Prescription refills and after Hours Phone Calls: After hour phone calls for non-emergency conditions requiring medical decision making may be assessed a phone call fee. Medication refills are not an emergency and patients should call during regular office hours to get these services.

Please let us know if you have any questions.

I have read the financial Policy. I have understood it and agree to this policy.

Patient's Name: _____ Date of birth: _____

Signature of the Responsible party: _____ Date: _____