

Bariatric Specialists of North Carolina, PA

Bariatric Financial Policy

Our doctors are dedicated to providing the highest quality medical care and long term follow-up support for our bariatric patients. Our staff is dedicated to educating our patients both clinically and financially during this life changing journey. Please read and sign the following policy, if you have any questions please ask we are happy to discuss any questions or concerns you may have.

1. We require a current copy of your insurance card at check-in or you will be considered a self-pay until proof of insurance is received.
2. All co-pays are due at the time of service. If you do not have your co-pay you will need to reschedule your appointment. We accept Cash, Visa, MasterCard, Discover and personal checks.
3. If we are a participating provider with your insurance company you are responsible for all co-payments, co-insurance, deductible amounts and any non-covered service. As a courtesy to you we will file your insurance claims as long as we have all the correct insurance and demographic information.
4. We do not accept Medicaid for bariatric procedures. If we are not participating with your insurance company or your insurance does not provide benefits for weight loss surgery payment in full is due at the time services are rendered.
5. Surgery estimates and any balance due will be taken prior to scheduling surgery. The estimate will only include our charge. Bills for the hospital, anesthesiologist, or laboratory tests are separate please contact these providers directly for estimates or billing questions.
6. If you have an insurance policy that requires referrals please have your primary care physician fax it to our office prior to your appointment date. It is ultimately your responsibility to make sure the authorization is correct and has arrived or you will be responsible for payment.
7. All balances are due and payable upon receipt of your statement. If after 90 days no payment has been made on your account you will be referred to a collection agency.
8. Self pay patients must pay in full at the time services are rendered and surgery prices will be collected at least 10 days prior to surgery. Before scheduling surgery please check your date we charge \$20 if you reschedule your surgery.
9. All Medical-form completion will obtain a charge of \$10 per form request. If additional information is needed, that cannot already be found in the chart in order to complete the request, a scheduled visit may be required. Once all pertinent information is received, the form will be completed with 7-14 days of submitted payment.
10. Any return check by the bank for "NSF" or "closed account" will be charged a \$25 service fee in addition to the amount of the returned check. We reserve the right to not accept personal checks from you if your account has a return check fee charge.
11. Patients are seen by appointment time, not arrival time.
12. Macgregor Sleep Center charges \$75 for missed appointments. Please give 24 hours notice if you need to cancel or reschedule your sleep study.

Authorization:

I agree to be responsible for my medical expenses regardless of insurance coverage. I authorize my insurance company, attorney or other parties to provide any payments information regarding my bill and make payment directly to Bariatric Specialists of NC, PA. I agree to pay all costs incurred if my account should become delinquent, including attorneys fees. I have read, understand and agree to this financial policy and I accept full responsibility for any balance due.

I authorize the physician in charge to administer medical care as is necessary, and allow release of medical records and x-rays to any party involved in my treatment.

Signature of Patient or Legal Guardian

Date