

Flagstaff OB/GYN

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FINANCIAL POLICY

Thank you for choosing Flagstaff OBGYN as your healthcare provider. We are committed to providing you with exceptional care. It is important for your understanding of our financial policy to maintain a good physician-patient relationship. All patients must accept our financial policy before receiving treatment.

No Shows & Late Cancellations

Missed or late canceled appointments represent a cost to us, to you, and to the other patients who could have been seen in the time set aside for you. A fee of \$25 will be charged if notice of cancellation is not provided 24 hours in advance. Reoccurring no shows/late cancellations may result in dismissal from the practice.

Method of Payment

Payments are due at time of service and/or upon receipt of statement. We accept cash, checks, and all major credit/debit cards. Returned payments may be subject to additional fees.

Self-pay

Self-pay (no insurance) requires full payment at time of service. As a courtesy we offer a sliding fee discount for most services for self-pay patients.

Billing Insurance

We must emphasize that as your healthcare provider, our relationship is with you, our patient, not with your insurance company. Your insurance policy is a contract between you, your employer, and your insurance company.

It is your responsibility as a patient to obtain a basic understanding of your insurance benefits prior to use of benefits. It is your responsibility to provide us with the correct and most up to date insurance information at time of service. Providing inaccurate or untimely information may result in an insurance denial. If your insurance company does not make a payment or your claim is denied, you will be responsible for paying any remaining balance.

Your insurance determines your responsibility (out of pocket costs) based on your plan benefits, for example:

- Copays: A predetermined rate you pay towards an office visit at the time of service.
- Deductible: The amount of money you must pay out of pocket before your insurance begins making payment.
- Co-insurance: The percentage share you will owe once the deductible has been paid. Example, 80/20 plan is 80% insurance and 20% patient.
- Out of pocket max: The most you could have to pay in one year, out of pocket, for your health care before your insurance covers 100% of the bill. This is an accumulation of deductibles, co-insurance and sometimes copays.

Any insurance estimate provided to you is not a guarantee that your insurance will pay exactly as estimated, as your insurance company and your plan benefits will determine the amount paid only once a claim is received and processed.

Out-of-network insurance can only be billed if you have out-of-network benefits. Out-of-network Medicaid or out-of-state HMO policies cannot be billed.

Insurance and benefit questions are always best referred to your insurance company.

Billing Surgery & Global Maternity

Surgery: The administrative work involved in booking a surgery procedure is extensive and you may be required to prepay or make a deposit upon scheduling your surgery.

- If you are self-pay (no insurance): payment is due in full upon scheduling payment must be received prior to your surgery.
- If you have a high-deductible insurance plan: you may be required to make a deposit of \$500.00 upon scheduling upon your insurance processing your surgery claim, this deposit will be applied to your balance or refunded to you for overpayment accordingly.

Global Maternity Package: Maternity care is billed to insurance as "a global fee" (billed together as a package) at the end of your pregnancy. This package encompasses routine visits during pregnancy and 6 weeks postpartum care. Global Maternity billing may be subject to deductibles and co-insurance based on your insurance coverage. Sonograms, fetal non-stress tests, genetic testing, and complications/problem visits outside of routine prenatal care are billed separately throughout the pregnancy and are not included in the global package.

Flagstaff Medical Center (FMC) charges are billed separately from our physician billing. For facility-related questions, please call FMC at (928) 779-3366 and ask for billing.

Financing Options

We understand that sometimes you need flexibility in your budget. We want our patients to focus on their health without the burden of how they are going to pay for their care. We offer in-house payment plans arranged on an individual basis. Plan arrangements are based on your balance size and will not exceed a 12-month agreement.

For billing questions for our office or if you would like to discuss financing options, please call our Billing Team at (928) 779-7851 and select option 5.

Collections

We reserve the right to forward your account to a collection agency if your balance remains unpaid for more than 90 days. If your account is turned over to collections, this may negatively impact your credit, and you may be responsible for additional collection fees.

Accounts that have been turned over to collections (bad debt) will result in dismissal from the practice until full debt is paid.

Our collection agency is TSI (Transworld Systems Inc). For collections questions, call (877) 282-1250, between 8am and 5pm Eastern Standard Time Monday – Friday.