

What Do I Have to Pay?

EFFECTIVE JANUARY 1ST, 2012:

A. DEDUCTIBLES:

Medicare Patients: We will START collecting your \$135.00 deductible for this year.

Non-Medicare Patients: If your policy includes a deductible, we will ask you to pay an average of \$300.00 of your annual deductible TOWARDS YOUR FIRST VISIT CHARGES.

B. PAST DUE AMOUNTS

All prior Past Due amounts

C. TODAY'S VISIT CHARGES

Based on insurance company guidelines, we ask that you pay:

1. Your "copay" for today's visit.
2. The prior visit and laboratory charges. These are the exact charges your insurance will determine as your responsibility according to your policy. The charges by us are entirely based on your insurance company's fee schedules for services.

Each insurance company's contract differs from that of others. Some items might be covered once or only a certain number of times a year regardless of your needs. We abide by your insurance company determination regarding charges for all such items.

It is difficult to determine, in advance, what a consumer will have to pay for each visit because of the multiple factors affecting each policy. The exact total charge for a visit is not known until the insurance company itself has done the calculations accounting for all of its own variables.

When we receive the insurance company's determination, your past visit "total charge" is then indicated on your statement. That is the amount your insurance company says we should collect. You will have received the original copy of the itemization and a notice of benefits that your insurance company sent to you in advance. So, our front desk will only ask that you pay the charges your insurance company has already informed you are your responsibility for your past visits.

Should you have any reason, we will be glad to set up a payment plan suitable to you.