

Insurance and Financial Responsibility - Co-Pay & Coinsurance Policy

To our valued patients and families:

It is our policy to collect co-pays and coinsurance payments upfront. Any coinsurance not listed on your insurance card will be collected as an approximation based on information from your insurance company. You may also be responsible for other charges that may incur at the time of service after your co-pay or coinsurance has been collected. Any coinsurance not listed on your insurance card will be collected as an approximate based on Medicare fee schedules; anything above our calculations that your insurance company has processed as allowable will still be due. You will receive a monthly statement regarding any open balances. If you have any questions or concerns regarding your co-pays or coverage, please call your insurance company member services.

Insurance and Financial Responsibility

The patient insurance assigns directly to The Heart group all medical benefits. I understand I am financially responsible for all charges resulting from services rendered by the practice, whether they are paid by the insurance. I hereby authorize The Heart Group to release all information necessary to secure the payment of benefits and further authorize the use of the signature on all insurance benefits.

By signing below, I acknowledge and agree to the policy stated herein.

☒ Agree ☐ Decline

Date:

Signed:

Electronically signed by

Visit Information

Patient

Visit

NOTICE TO CA CONSUMER

A holder of this medical debt contract is prohibited by Section 1785.27 of the Civil Code from furnishing any information related to this debt to a consumer credit reporting agency. In addition to any other penalties allowed by law, if a person knowingly violates that section by furnishing information regarding this debt to a consumer credit reporting agency, the debt shall be void and unenforceable.