

# Clinical Financial Policies

The JRWC accepts insurance from most major insurance companies. However, please remember that insurance is a contract between you and the carrier. As a courtesy to our patient, we will review patient's insurance coverage, estimate insurance company coverage and file claims with patient's insurance carriers. The patient is required however to assign all insurance company payments directly to the practice to avoid and misunderstandings regarding payment for professional services rendered. The patient or guardian will be held responsible for any charges not covered or denials by their insurance company. We will work with you in every way possible to maximize your insurance benefits.

If the patient is unwilling to assign payments, all services provided will be billed as self-pay at the time of each visit.

All Obstetrical and surgery and patients will be required to establish a written Financial Agreement for payment at the time of the services rendered. The patient will be notified when the payment has been remitted by their carrier for outstanding claims via their account statement. The Insurance Billing Specialist will apply those payments to the patient's account and refund any credit balances the calendar month following payments from the carrier.

By law, the insurance carriers must remit payment or deny the claim within 30 days of initial notice of the claim. If any insurance problem arises while trying to process your claim, JRWC will ask the patient to assist in resolving said issue to maximize payment. The JRWC firmly believes that a good physician/patient relationship effort to clarify any misunderstandings or concerns in regard to account balance and payments.

All patient accounts are due and payable within 30 days of services rendered unless payment plan has been arranged at the time services were rendered. Each month you will receive a statement for any balance due with payment expected within 30 days. If your payment is not received in a timely manner, our staff will mail a reminder notice indicating there is a problem with your account and you will need to contact us. If the payment of account charges is not remitted in full after 90 days of notice, without pending insurance claims or financial arrangements, all future credit with us will be limited until balance is paid in full.

All patients are required to pay any co-pay and/or deductible necessary at the time of service. If you have any questions regarding the financial policy, please ask to speak with the JRWC's Practice Manager.

**I have read and understand the JRWC's financial policies and do hereby agree to accept them.**

\_\_\_\_\_  
Patient/Guardian Signature

\_\_\_\_\_  
Date