

Carolina Eye Care pa
Financial Policy

Carolina Eye Care PA believes that a good health care practice communicates a financial policy to its patients. An informed and responsible patient should never have a credit problem with our practice.

1. PAYMENT is expected at the time of your visit. We accept cash, check debit, and major credit cards.
2. PAYMENT for services covered by insurance includes any balance due, unmet deductible, co-insurance, co-pay, or non-covered charges, per your insurance policy.
3. We are participating providers for most insurance carriers, and will file all of these insurance claims. However, YOU are ultimately responsible for payment in full. Please remember that insurance is a contract between the patient and the insurance company.
4. CREDIT. Occasionally an *established* patient incurs unusually high charges for services provided by our doctors. We will work with these patients to establish an appropriate payment plan and obtain a signed financial agreement.
5. RETURNED CHECKS will incur a \$20 service charge. You will be asked to bring cash or a money order to cover the amount of the check plus the service charge.
6. ACCOUNTING PRINCIPLES. Payments and credits are applied to the oldest charges first, except for insurance payments which are applied to the corresponding charges.
7. DISABILITY FORMS, INSURANCE FORMS, COPIES OF MEDICAL RECORDS, ETC. require office staff time. We require pre-payment for such tasks, the length and complexity of which determines the exact fee.
8. Patient whose accounts have been turned over to a collection agency will be responsible for the account balance and all costs associated with collection, including reasonable attorney fees.
9. We charge \$20 copay fee if copay is not paid at time of visit.
10. We reserve the right to charge for missed appointments at the rate of \$25 per missed appointment.

Signed: _____ (Patient, Parent or legal guardian)

Date: _____