

Carson Family Care Center Payment Policy

We are committed to providing you with the best possible care. If you have medical insurance, we want to help you receive your maximum allowable benefits. In order to achieve these goals, we need your assistance and your understanding of our payment policy.

PAYMENT

Payment is due at the time your services are rendered unless payment arrangements have been approved in advance by our staff. We do not make payment arrangements for the first visit; you must be an established patient.

We accept several forms of payment, including: cash, checks, Visa, MasterCard, Discover, American Express, or Care Credit. Returned checks are subject to a fee ranging from \$25.00 - \$40.00 depending on the face value of the check, and must be paid in cash or money order. Also, any balance due over 30 days is considered DELINQUENT and should be paid before your next office visit. We realize that temporary financial problems may affect timely payment of your account. If such problems do arise, we encourage you to contact us promptly for assistance in the management of your account. Please call the Billing Department at 727-935-6578.

CONTRACTED INSURANCE COMPANIES

We accept many insurance plans. Please check with our staff for a current list. We file these insurances for you; however, you are responsible to pay your co-payments, deductibles, or your percentage of the bill at the time of your visit, as this is stated in your contract with your insurance company. This can be paid by cash, checks, Visa, MasterCard, Discover, American Express, or Care Credit.

If your insurance plan assigns you a Primary Care Physician (PCP) for a Health Maintenance Organization (HMO) plan and it is not one of our physicians, you will be responsible for the visit at the time of service.

OTHER INSURANCE

If you have an insurance plan other than those we are contracted with, you will have to pay for your services the day of your appointment and seek reimbursement from your insurance company. In special instances, we may accept assignment of insurance benefits on other insurance companies provided your deductible has been met and the services performed are covered under your contract.

We emphasize that as medical care providers, our relationship is with you, not your insurance company. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are your responsibility from the date that the services are rendered.

If you have any questions about the above information or any uncertainty regarding insurance coverage, PLEASE do not hesitate to ask us. We are here to help you!

MISSED APPOINTMENTS

Missed appointments without cancellation and rescheduling prevent us from providing for your health care needs and those of other patients. If you have scheduling conflicts, we will be happy to work with you in rescheduling a time convenient for you. A call to cancel an appointment in advance will allow us to use the appointment time for other patients needing to be seen. We will charge a fee of \$25.00 for office visits missed or cancelled without 24 hours notice.

Print Patient Name: _____ Date of Birth: _____
Patient Signature: _____ Date: _____