

Palouse Foot & Ankle Financial Policy

Palouse Foot and Ankle Clinic (PFAC) are committed to providing the highest level of quality medical care and personal service to our patients. For every commitment, there is an obligation. We feel it is the responsibility of the patient or guardian(s) to meet their financial obligations.

As we see many patients from many different insurance plans, it is impossible for us to know all the covered benefits, co-pays, and deductibles for each plan. In addition, your insurance company does not guarantee payment to us. While it is our intention to assist you, it is your responsibility to ensure that all services rendered or referred by PFAC on your behalf are paid in full and in a timely manner.

In order for PFAC Financial Policy below are our financial requirements.

Patients without Insurance Coverage (Self-pay) and New Patients (including patients who have not been seen by PFAC in the last three years):

Payment in full at the time of service is expected. If absolutely necessary, short-term payment plans are available. Payment plans must be requested prior to services being provided.

Contracted, PPO, and HMO Patients that have co-payment and/or Deductibles:

As a courtesy, we will bill your insurance company for services provided. PFAC requires that you present your insurance card and co-pay (as required by your insurance company) at every visit. This allows us to ensure we have accurate and up-to-date information for billing purposes. *If you do not have your card with you, you may be asked to reschedule your visit or you have the option of being set up as self-pay and paying in full at the time of service.* If your insurance plan has an annual out-of-pocket deductible you are expected to advise us of this and pay in full at the time of service until the deductible is met. Once your claim is processed by your insurance, any additional co-insurance, deductibles, or non-covered services will be due upon receipt. If your insurance changes please let us know as soon as possible.

Medicare Patient:

As a courtesy, we will bill Medicare for you. You will receive a statement of these charges after Medicare has processed the claim. If you have supplemental insurance to Medicare, we will also bill your secondary insurance for you. You will receive a statement of these charges after Medicare and your secondary insurance have paid their portion or applied any applicable charges to your deductible. Occasionally, Medicare supplemental insurances will pay directly to you. In this case, please contact our office immediately or send the check to us so that we can keep your account current.

Non-contracted Insurance and Private Insurance:

As a courtesy to all our patients, we will bill your primary insurance for you. However, you are responsible for full payment of any charges insurance doesn't cover. You are expected to pay in full at the time of service. We do not take any health insurance from outside the U.S. If you are unsure whether your insurance is contracted with our office, you will need to call you insurance company and verify that information prior to your visit.

Auto Accidents, Civil Suits, Home or Business Owner's Claims:

Due to often lengthy resolutions of these claims, you are expected to pay in full at the time of service. We do not bill third party insurances.

Worker's Compensation Claims:

If you are being seen for an injury that occurred during the course of your employment, please be sure to notify the receptionist that you injury is "work related" so we can ensure the appropriate paperwork is completed. We are contracted with the Idaho State Insurance Fund, and the Washington Department of Labor and Industries. If your employer is self-insured with another carrier, please bring the appropriate paperwork with you from your employer and notify the receptionist of the correct carrier. Please check with this carrier for any restrictions regarding who you may see for your injury/claim. Please be advised that our office is required by law to report all work-related injuries. We cannot choose not to report the accident if have knowledge that it is work-related. If your employer or their insurance carrier denies the claim, you will be held financially responsible for all charges.

Medical Procedures:

Minor surgeries and procedures are billed differently than routine office visits. You are responsible for knowing your health insurance benefits for procedures. Please be prepared to pay charges your insurance does not cover. A minor surgery or procedure could include, but is not limited to; wart removal, lesion destruction, biopsy procedures, incision and drainage, laceration repair, and toenail removal.

Student and Short Term Patients:

If you would like, we can send your statements and any correspondence to an alternate address within the U.S> (i.e. parents or permanent address.) However, the mail will be addressed to you if you are over eighteen years of age and you will be held financially responsible for any charges incurred. In addition, you will also be responsible for paying any co-pays at the time of service.

NSF checks will be charged \$30.00

Collection Accounts:

If your account is sent to collections due to non-payment, it will be referred to:

Chapman Financial Services, Inc. 1-800-876-2328

In addition PFAC reserves the right to terminate the doctor-patient relationship if your account is sent to collections.