

Stillwater Spine & Sports Center, Inc.

Tye K. Le Duc, D.C.
80 Four Mile Drive
Suite 16
Kalispell, MT 59901

PAYMENT POLICIES

Insurance

- ♦ We will gladly submit insurance claims to your insurance carrier at no additional charge to the Patient or Responsible Party. We submit claims to only two insurance carriers (primary and one supplemental). The only exception is Medicare which we are legally required to bill. *Medicare* will then submit your claim to any supplemental insurance you may have.
- ♦ State law requires that your insurance submit payment to us within 30 days however, sometimes insurance can be reluctant to pay or just plain slow! Payment is due on accounts within 60 days, regardless of your insurance coverage. We will be glad to assist you in contacting your insurance company regarding your claim, but ultimately the Patient or Responsible Party is expected to contact his/her insurance company if the insurance carrier fails to respond, is late responding, pays only a portion of what is due, or denies the claim.
- ♦ We will resubmit your claim *one time only* at no additional charge. If your insurance carrier has not paid after resubmitting your claim, Stillwater Chiropractic, Inc. cannot pursue collection of insurance accounts without additional costs to the Patient or Responsible Party. Should you notice that your insurance has not paid on your account, you are responsible for contacting your insurance carrier to determine the status of your claim.
- ♦ If a claim is returned to Stillwater Chiropractic, Inc. due to an improper address, incorrect identification number or any other incorrect information, we will resubmit your claim after confirming correct information with you. Claims are submitted via the United States Postal Service. In the event a claim is not received by your insurance carrier, it will be returned to us in the mail.
- ♦ Insurance coverage and deductible information will be verified before Stillwater Chiropractic, Inc. considers an account an "Insurance Account". We estimate the Patient's or Responsible Party's portion or co-pay based on information from your insurance carrier. Please realize that this may contribute to a Credit on your account or a Balance Owing greater than was estimated.
- ♦ If your insurance carrier is unavailable at the time of service and cannot verify your coverage or deductible, a payment or some portion of payment is expected at the time of service.
- ♦ Some charges billed by this office **may not** be covered by your insurance. The Patient or Responsible Party is ultimately responsible for any amount over and above what your insurance will cover in addition to any co-pay that applies to your policy.

General

- ♦ Payment in full is expected at the time of service. However, we are sensitive to the fact that some Patient's may not be able to pay in full. We will assist you in setting up an individual payment plan requiring a monthly payment. We do require, however, that your balance is **kept under \$300.00**. In the event that your balance does exceed \$300.00, you will no longer be able to receive treatment until a payment has been made. A 1.5% finance charge will be applied to any account on any balance over 60 days.
- ♦ In the unlikely event that your account is turned over to a collection agency, the Patient or Responsible Party will be responsible for payment of any and all collection fees, attorney fees and court costs incurred in the collection of your unpaid balance owed, including finance charges. Should an account be designated a "Collection" account, you will be approved as a "Cash Only" account, to be paid in full at the time of service should you require our services in the future.
- ♦ Our office can be a very busy place. If we are given plenty of notice on cancelled appointments, we can fill those appointment times. However, we have a *non-cancellation* or *no-show* policy. A \$20.00 charge will be applied to your accounts for appointments not cancelled at least 4 hours prior to the scheduled time or for failure to show up for scheduled appointments. **This charge cannot be billed to insurance!**

By Signing Below, You Are Stating That You Fully Understand And Agree With The Terms Set Forth In These Payment Policies

Date

Signature of Patient or Responsible Party

Stillwater Chiropractic, Inc.

Tye K. Le Duc, D.C.
690 North Meridian, Suite 201
Kalispell, MT 59901

PAYMENT OPTIONS

Stillwater Chiropractic, Inc. provides several options for payment, Cash, Credit Card (Visa or MasterCard), or Check. In addition, we accept most major medical insurance (General Insurance), Personal Injury (PI), Workers Compensation and Medicare. Please inquire at the front desk regarding the option of your choice.

Cash

Payment is expected at the time of service. However we are sensitive to the fact that some Patient's may not be able to pay in full. We will be happy to assist you in setting up an individual payment plan. We do require, however, that your balance is kept under \$300.00. In the event that your balance does exceed \$300.00, you will no longer be able to receive treatment until a payment has been made. A 1.5% finance charge will be applied to accounts over 60 days old.

Insurance

Once your insurance coverage has been verified, Stillwater Chiropractic, Inc. will submit your claim to your insurance carrier at no additional charge to you. We will submit your claim to two carriers (primary and one supplemental). If your insurance carrier fails to respond or denied coverage due to incorrect information, we will *resubmit* your claim *once*. Some charges billed by this office **may not** be covered by your insurance. The Patient or Responsible Party is ultimately responsible for any amount over and above what your insurance will cover in addition to any co-pay that applies to your policy.

Things We Don't Like To Do

Our office can be a very busy place. If we are given plenty of notice on cancelled appointments, we can fill those appointments times. However, we have a *non-cancellation* or *no-show* policy. A \$20.00 charge will be applied to your accounts for appointments not cancelled at least 4 hours prior to the scheduled time or for failure to show up for scheduled appointments. **This charge cannot be billed to insurance.**

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