

The Pisgah Institute

For Psychotherapy and Education, P.A.

Patient Financial Agreement

The management of mental health-benefits has become very complex and time-consuming. We try and be accurate when informing you of your benefits, but as insurance companies clearly state, **“benefit information is not a guarantee of payment.”** Therefore, we cannot be certain of your account balance until after we receive payment from your insurance company.

INSURANCE:

- ❖ You are responsible for knowing whether your insurance covers the services of the provider you are seeing. To contact your insurance company about this, use the customer-service numbers on your insurance card, or ask your employer.
- ❖ Insurance policies are contracts between you and your insurance company. We file claims as a courtesy, but you are responsible for issues beyond our control. If your insurance does not pay within a reasonable time, you will be responsible for the **full payment**.
- ❖ We will file your secondary insurance as a courtesy. However, you will be responsible for what your primary insurance does not cover and/or what your secondary insurance does not pay in a timely manner.
- ❖ If your provider is not covered by your insurance company, **payments are due in full** when services are provided.
- ❖ We will **only** retroactively file Medicaid charges **six months** from the date you give us your Medicaid card.

Balances:

- ❖ **If your balance is over 30 days past due, ask to speak to the patient account coordinator.**
- ❖ **Any account with a balance that has not received a payment in 90 days will have their account placed on hold from scheduling any further appointments.**
- ❖ **If a payment plan has been set up and you have missed a payment on two occasions, this will be cause for an automatic dismissal.**

Co-Payments:

- ❖ Co-payments are due at the time of service. This is the **total** of what the insurance does not pay. If co-payments are not made, we may be unable to continue to provide services.

No Shows/Late Cancellations:

- ❖ There are charges for missed appointments and late cancellations, which are any appointments cancelled less than **24 hours** prior to the appointment’s start time. These fees can range from **\$65-\$100** depending on the length and type of appointment.
- ❖ Patients are responsible for their appointments. Reminder calls are a courtesy. Cancellations within 24 hours and no-shows may be charged for, and you will be responsible for the charge.

Additional Charges:

- ❖ Charges for phone consultations may not be covered by insurance. Phone consultations are defined as phone calls made to/from the patient’s doctor or the doctor-on-call outside of a scheduled appointment and/or office hours.

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- ❖ Prescriptions and refills are charged **\$20-\$30** per prescription written, called in, or faxed, outside of a scheduled appointment.
- ❖ Contact initiated through the patient portal which requires review by the care provider for care management, and may include the ordering of prescriptions, tests, or further care coordination, may be considered a billable service. If your insurance is billed, you will be responsible for your co-pay/deductible for this communication.
- ❖ Office visits with the psychiatric nurse will be filed with your insurance, and you may be responsible for your copay, depending on your plan.

I have read and understand this agreement.

SIGNATURE

DATE