

## OFFICE POLICIES

Thank you for choosing Main Street Medical to be your healthcare provider. We are committed to serving you with high quality and skilled care. The services we provide are services you have elected to receive. In order to provide our best care to all patients, we have implemented the following office policies:

### APPOINTMENTS

Patients are asked to arrive 10 minutes early for scheduled appointments. Any patient who arrives more than 10 minutes after the scheduled appointment time will be asked to reschedule and will be subject to a missed appointment fee.

### CANCELLED AND MISSED APPOINTMENTS

Please cancel your appointments at least 24 hours in advance by calling (650) 726-1200. Any patient who misses an appointment without 24 hour advance notice will incur a \$50 cancellation fee the first time, \$75 the second time, and \$150 the third time. This fee will be billed directly to you, not to your insurance company, as allowed by insurance contracts. Patients who miss more than three appointments are subject to dismissal from the practice.

### PAYMENT

A payment is due at the time of check-in for all medical services, without exception. We participate in most insurance plans. If you are insured, we will collect co-pays or deductibles at the time of check-in and bill your insurance company for the balance. If you don't have your insurance card, you must pay in full at the time of check in until we verify your coverage. You are responsible for knowing your insurance coverage. Any balances not paid by your insurance company will be your responsibility. NOTE: We are required by law to make every attempt to collect patient co-pays and deductibles for insurance plans. Please help us remain in compliance by paying promptly,

### METHODS OF PAYMENT

We accept cash, check, VISA, MasterCard, or Discover for our services. Credit balances will be applied to unpaid balances. We will mail one invoice for each outstanding balance. Each additional invoice will result in a \$5 processing fee to be added to your balance. Any balances not paid within 90 days will incur a 1.5% interest charge per month applied from the 31<sup>st</sup> day the balance was unpaid. After 120 days, unpaid balances may be sent to collections. All fees related to the costs of collection, including collection costs, attorney's fees and court costs, will become your responsibility.

### MINORS

Responsibility for payment for services rendered to a minor whose parents are divorced rests with the parent who arranges treatment. Court-ordered responsibility must be resolved by the parents before the patient is to be treated by this office. A parent must accompany children under 16 years old.

### REFERRALS/AUTHORIZATIONS

Referral requests are submitted by this office each business day and take 3-5 business days to process. Referrals must be picked up at our offices. They will not be mailed unless you provide a stamped, self-addressed envelope. You will be notified by phone when your referral is complete. Please call us if a week has passed and you have not yet heard about your referral.

### CLAIM SUBMISSION

We bill insurance companies directly as a service to our patients. Your insurance company may require information directly from you to process your claim. You are responsible for complying with their request. Remember that you are responsible for your balance whether or not your insurance company pays. We will collect payment from you for any insurance company claim not paid within 90 days of submission.

### RECORD REQUESTS

We will furnish you with a copy of your medical records within 30 days of receipt of a written request. We will collect fees for copying each page of the record and mailing the record, in accordance with California law.

Print and Sign Name: \_\_\_\_\_ Date: \_\_\_\_\_