



777 Canal View Blvd., Suite 400, Rochester, NY 14623 | 1630 Empire Blvd., Webster, NY 14580
P: (585) 244-3430 | F: (585) 244-2202

FINANCIAL POLICY

Dear Patients, Parents, and/or Legal Guardians:

Welcome to Women Gynecology and Childbirth Associates! Please take a moment to review our Practice's new financial agreement. This policy will take effect upon signing and supersedes any financial agreements previously signed with our practice.

The services you have elected to participate in implies a financial responsibility on your part. The responsibility obligates you to ensure payment in full of Women Gynecology and Childbirth Associates, PC fees.

1. Women Gynecology and Childbirth Associates, PC participates with most major insurance plans. Knowing your insurance benefits is your responsibility. WGCA will verify benefits for you, but this is not a guarantee of payment. Valid insurance information is to be provided at the time of booking, and a copy of your insurance card is required at the time of service. If valid insurance information is not provided to WGCA and the insurance companies filing limit is not met, you will be responsible for the charges not paid by insurance.
2. Patients with no insurance, out of network, or a non-participating insurance plan: payment for service is expected before the services are rendered, unless specific payment arrangements are discussed prior to the appointment.
3. Payment will be collected at the time of service for all copays/deductibles/coinsurance and past due balances. If you are unable to make your payment in full before services are rendered a \$20.00 fee will be added to your account unless specific arrangements are made prior to your appointment.
4. The remainder of your balance is expected to be paid over four equal monthly payments.
5. There will be a \$5.00 fee added to your account every 30 days for failure to make payment.
6. Returned checks are subject to a \$35.00 service charge and will prohibit you from paying by check at future visits.

7. Outstanding personal balances older than 60 days (from the date the claim pays, or the date of service for self-pay) are considered delinquent and will be transferred to our collection agency (Transworld Systems).

8. If lab work is required to be sent to an outside lab, you will be billed separately by the lab.

9. Prompt arrival time to appointments is imperative. We ask that you notify the practice no less than 24 hours in advanced if you are unable to keep your appointment. If you fail to show up to your scheduled appointment, we will take the following steps:

- 1st missed appointment- reminder letter.

- 2nd missed appointment- \$50.00 fee for office visits, \$100.00 for procedures (IUD insertion, in office procedures, ultrasounds etc.)

- Subsequent missed appointments- review by a physician.

10. Your visit may consist of multiple services, meaning your insurance company may assign multiple copayment's, co-insurances, or unmet deductibles for these multiple services.

11. You recognize that a provider may perform Telemedicine services that are billable to your insurance. You will be responsible to pay any cost-share that is assigned by your insurance.

We are committed to providing every patient with excellent medical services and do not want financial hardship to come in the way of your care. Since open communication can benefit both parties, any financial hardship should be discussed with the Business Office (585-244-4360) so that payment arrangements can be made as early as possible.

By signing below, you acknowledge that you have read and fully understand our Financial Policy above. You authorize the release of any medical or other information necessary to process your claims. You also request payment of government benefits be made to WGCA, PC.

Patient Name

DOB

Signature

Date