



## Policies and Procedures Agreement

**Patient Information and Insurance Cards:** Your personal information sheet and insurance card are an important part of your medical record. It is your responsibility to make sure that you update this information at each visit to keep your record current. As this may seem inconvenient, it is necessary to keep your insurance and contact information updated to insure you receive proper care.

**Late Policy:** Every effort is made to keep our physicians schedules on time; therefore if you are more than **15** minutes late, we will reschedule your appointment to the next available with a physician in the office; however, there is no guarantee that you will be seen immediately or by the originally scheduled physician. If all the physicians' schedules are full you will be asked to reschedule your appointment to a later date.

**Missed/Cancelled Appointments, Procedures or Surgeries:** Every effort is made to accommodate our patients request for appointment, procedure or surgery dates/times; therefore, it is important that **you** make every effort to keep your scheduled appointments. Cancellations of less than 24 hours for missed office appointments/ no-show appointments will be subject to a fee of **\$50.00**. Cancellations of less than 7 days of procedures or surgeries are subject to a fee of **\$150.00**. Please be advised that chronic missed appointments may result in dismissal from our practice.

**Fee for Completion of Forms, Reports, and Letters:** This is a non-insurance covered service which requires time from administrative and nursing staff as well as the doctors; therefore, a fee of **\$15.00** will be charged for the completion of forms or the writing of letters. Once the **\$15.00** fee is paid for the first form, each form thereafter will be **\$5.00** per form. \*Forms include all forms, reports and letters.

**Transferring of Records:** All patients must sign a records release form to have their records copied or to send them to another provider or organization. Copies will be provided to the patient for a **\$10.00** administrative fee PLUS **\$0.50** per page up to 50 pages and **\$0.25** per page thereafter. There is no fee to transfer records directly to another provider or organization.

**Payment for Services for Patients with Insurance:** According to your health insurance plan you are responsible for paying your co-payment at the time of service. Co-pays that are not paid at the time of service will be billed with an additional **\$10.00** fee. This fee is necessary to cover administrative and supply costs when billing for co pays. If we participate as providers with your health plan we will bill your insurance company for your visit. If we are not contracted with your insurance company, you are responsible to pay for your visit after the services are rendered.

Women's Health and Surgery Center files your insurance as a courtesy. We ask that if your account remains unpaid after 45 days that you contact your insurance company for payment.

**Payment for Services for Patients without Insurance:** You will be responsible for payment by cash, check or credit card on the day of service. On bills with extensive procedures and by approval of our billing department and office manager, you may set up a payment plan with our office.

**Payments:** Unless other arrangements are approved by the billing department and office manager in writing, the balance on your statement is due on the due date posted on your statement. If your account becomes past due, Women's Health and Surgery Center will take all necessary steps to collect this debt. If we have to refer your account to a collection agency or lawyer, you agree to pay all collection, lawyer and court fees incurred.

**Returned Checks:** There is a **\$50.00** fee for any checks returned by your bank.

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Patient Signature

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Date

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Printed Name