



Concord OB/GYN Patient Financial Policy

We have adopted the following financial policy to avoid any misunderstanding between you and this office. Our Billing Department is available 7:30 AM to 4:00 PM to discuss any questions you may have regarding your insurance or your account at Concord OB/GYN. We are dedicated to providing the best possible care and service to you and regard your complete understanding of your financial responsibilities as an essential element of your care and treatment. If you have any questions, please call our billing department at 978-371-0302 x 202.

Insurance

We participate in most managed care plans. If you are insured by a plan we do not participate with, payment is required at each visit. Your insurance policy is a contract between you and your insurance company. It is your responsibility to know your own coverage. We will process your insurance claim for you if you assign the benefits to us. In other words, you give us permission to bill your insurance company directly and they will pay us directly. You will be responsible for providing correct insurance information at each visit. You are responsible for obtaining referrals for services if required by your plan. All medical treatment and services that are not covered by your plan will be your responsibility. Patients are responsible for all deductibles, co-payments, non-covered services and out of network services. All co-payments are due at the time of the visit.

No Insurance Coverage

Full payment is expected at the time of service. We accept cash, check, and all major credit cards. Please note that the amount charged will not include any expenses related to laboratory or ultrasound services.

Minor Patients

The adult accompanying the patient and the parent or guardian will be responsible for all services rendered to minor patients.

Delinquent Accounts

Payment is due upon receipt of a statement. If your account becomes delinquent, we will make every effort to collect the debt incurred prior to being sent to a collection agency and possibly being dismissed from the practice.

No Show/ Late Cancel Fee

Providing exceptional care to our patients in a timely manner is of the utmost importance to us. In order to provide the care and time you deserve during your appointment with your provider, it is very important that you arrive on time for your scheduled visit. As a courtesy, and to help patients remember their scheduled appointments, Concord OB/GYN sends phone and text message reminders 3 days in advance of your scheduled appointment.

We understand that things come up and schedules change. If your schedule changes and you can no longer keep your appointment, we ask that you contact us as soon as possible to reschedule or cancel your visit so we may offer that appointment to another patient in need of our care. Concord OBGYN will now require that you provide us at least 24-hours' notice if you are unable to make your appointment. If you do not attend your scheduled appointment or if you do not cancel or reschedule your appointment within this window, we may assess a **\$50 Late Cancellation/No-Show service charge** to your account. This charge is not reimbursable by your insurance company and will be billed to you directly. All fees will need to be paid prior to rescheduling your appointment.

By signing below, I understand the Patient Financial Policy that includes the "Late Cancellation/No-Show" policy of Concord OB/GYN Associates. I understand that I must call to cancel or reschedule any appointment at least 24 hours in advance in order to avoid a potential \$50 Late Cancellation/No-Show fee.

Printed Patient Name

Date of Birth

Signature of Patient or Parent/Legal Guardian for Patients Under 18

Date