

# Dermatology Specialists of Boulder, PC Financial Policy

Thank you for choosing Dermatology Specialists of Boulder (DSB). Our goal is to provide you with the highest level of patient care. We believe that communication between our practice and our patients, on all levels, is very important. For this reason, we would like to make you aware of our financial policy.

*Patient insurance cards and current billing information will be required for our office to file a claim with your insurance company, on your behalf. If this information is not provided at the time of your visit, we require immediate payment in full for services received.*

## **CONTRACTED INSURANCE CARRIERS..."IN-NETWORK"**

As a service to you, we will file all claims with contracted insurance companies. Co-pays and outstanding deductible amounts are due at the time of your visit. Once your insurance claim is processed, your insurance company will determine your financial responsibility, the amount due to DSB.

If referrals are required by your insurance company, please contact your primary care physician. All referrals must be received by our office before your scheduled appointment.

## **NON-CONTRACTED COMMERCIAL INSURANCE ..."OUT-OF-NETWORK"**

DSB will file your insurance claim on your behalf. Please be aware that your financial responsibility may increase due to "out of network" benefits. Co-pays and deductible amounts will apply.

## **MEDICARE...**

We will file Medicare claims on your behalf. If you carry supplemental insurance, please provide us with that information at the time of your visit. Please note that secondary insurance billing is most efficient if you are enrolled in the Medicare Crossover plan, which you must do yourself.

## **MEDICAID...**

Please be aware DSB is not a Medicaid provider.

## **TRAVEL INSURANCE...**

Payment will be required at the time of service. DSB will provide an insurance claim form which you can submit for reimbursement through your insurance company.

## **BILLING...**

Patient or responsible party hereby acknowledges and agrees that any account which becomes delinquent will be subject to the services and fees of a collections agency. Returned checks will be assessed a fee of \$40.00. Please see DSB Registration Sheet for further details.

**Please Note...**Your insurance is a contract between you and your insurance company. Our relationship is with you. We recommend that you become familiar with the coverage, rules and benefits of your health plan. Please refer to the back of your insurance card for contact information.

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Patient	Responsible Party	Relationship to Patient
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Signature of Responsible Party	Date
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