



## **Financial Policy Agreement**

Thank you for choosing Rosedale Health & Wellness for your healthcare needs. We are dedicated to providing you with quality up to date personal care. In consideration of receiving services from Rosedale Health & Wellness, your agreement with our financial policy is required.

Except as indicated below, payment is required at the time of service. We accept cash, major credit cards and personal checks.

### **INSURANCE:**

- You are required to furnish valid insurance information along with a photo ID at each visit.
- We participate in most managed care plans and will bill your insurance as determined by our contract. Copayments and non-covered services are due and payable at the time of your visit. You may be billed for any deductibles or coinsurance as determined by your policy.
- If you provide incorrect or invalid insurance information, you will be responsible for payment in full at the visit or choose to reschedule when you have proper documentation.
- At times it is necessary for your insurance company to verify with you any additional insurance plans or medical care you receive. It is your responsibility to comply to these requests in a timely manner so that your claims will be processed efficiently and correctly by your plan.

### **MEDICARE PLANS:**

- We participate with traditional Medicare as well as most IN STATE managed care Medicare plans.
- Your Medicare deductible varies each year and you are responsible for any deductible amounts plus coinsurance and/or copays mandated by your plan.

### **MEDICAID PLANS:**

- We are participating with North Carolina Medicaid and by law are required to follow their policies and procedures. Some NC Medicaid plans require you to obtain a referral from the designated Primary Care Provider (PCP) listed on your NC Medicaid card.  
PLEASE NOTE: Rosedale Health & Wellness is NOT considered a PCP with North Carolina

Medicaid. Per NC Medicaid guidelines, you cannot be seen by our providers unless a valid referral is in place. We are not participating with any out of state Medicaid plans.

- NC Medicaid requires you to pay a \$3.00 copay at each visit.

**SELF PAY/OUT OF NETWORK:**

- You have the option to seek care with an in-network specialist if it is determined that we do not participate with your insurance plan. If you choose to continue your care with our office, you will be considered “Self-Pay” and will speak to a Billing Coordinator to discuss payment options.

**FEES FOR ADMINISTRATIVE SERVICES:**

- Due to the large volume of cancelled/no show appointments, there will be a minimum charge of \$25.00 if the office is not notified within one business day prior to the appointment date. Please contact our office during business hours should you need to cancel.
- There is a \$30.00 fee for returned checks.
- Fees for letters and/or documents that require medical review and provider signature are subject to a \$25.00 fee. This amount is payable prior to the completion of any forms.
- Rosedale Health & Wellness will be happy to release any medical records in the event you need to seek care elsewhere. We require you to sign a Release of Information form so that we can send these directly to the requesting provider’s office. In the event you wish to have copies for your own use, our fees will be in accordance with the N.C. Gen. Stat. 90-411.

We understand that temporary financial problems may affect timely payment. We encourage you to communicate any such problems so that we may assist you in the management of your account.

**I understand and agree to the Rosedale Health & Wellness Financial Policy.**

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_