

**OFFICE FINANCIAL POLICY**

Thank you for choosing Dr. Tiffany Grunwald for your medical care. The information below is to help guide you through the financial aspects of your care. If you have any further questions after reading this policy, please feel free to call the office.

**OUT OF NETWORK**

Dr. Tiffany B. Grunwald is an out of network provider, however she does accept most insurances. Please check with your carrier to see if you have out of network benefits.

**INSURANCE BILLING**

Your insurance policy is a contract between you and your insurance carrier. We will submit a bill to your carrier for our services with the exception of Medicare or Blue Cross EPO plans or any HMO plans. Some services we provide may be considered not medically indicated according to your policy. **You are responsible for the full payment of non-covered charges.**

**You are responsible for the payment of any deductibles, co-pays, co-insurance and non-covered services at the time of your service as listed on your EOB or at the time of your office visit. You are also responsible for the difference between the service charge and any payments made. We will appeal any low payments or non-payments. We will appeal twice. But ultimately, you will get a balanced bill.** Please notify us immediately of any changes in your insurance coverage.

Patient responsibility can be waived but only for financial hardship reasons pursuant to a charity care program that our practice offers.

**If you do not have insurance coverage, you will be responsible for the full balance of the arranged fee at the time of your service.**

**MEDICAL RECORDS RELEASE:**

If you need a copy of your medical records, you will need to complete and sign a standard authorization release form. There is no charge for copying your records once each calendar year.

Patient Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_