

# CHEGAR FACIAL PLASTIC SURGERY

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## FINANCIAL POLICY

Thank you for placing your confidence in our physician. We wish to take this opportunity to review our payment policy for services rendered. All payments to Dr. Burke Chegar of Chegar Facial Plastic Surgery will be processed through the Northside ENT billing department and will be subject to Northside ENT financial policies. Please contact us with any questions or if you are unable to make a timely payment. We have a direct line to a representative who can help you at 317.844.6403.

All co-pays are due at the time of your visit. Any co-pays not paid at the time of your visit will have a \$10.00 service charge added to your account.

There will be a \$20 fee for all no shows or appointments cancelled within 24 hours of your appointment.

Deductibles may be collected prior to surgery as indicated by your insurance company.

**Method of payment:** We accept all major credit cards, as well as access to a line of credit by Care Credit. Checks are accepted, but prepayments for surgeries will delay the surgery until the check clears the bank. Cash is also accepted.

**Do I need a referral?** If you are unsure, contact your insurance carrier. If your company requires a referral and we have not received an authorization prior to your arrival at our office, we will make one attempt to call your primary care physician to obtain it.

**Hospital, X-ray, lab, pathology and anesthesia charges** are billed separately by each facility or provider. We are not responsible for knowing rates or procedures for these bills.

**Cosmetic surgery:** If you are having cosmetic surgery performed with an insurance procedure, the insurance portion is billed separately and does not cover these expenses. Any charges, including deductible and co-insurance, related to the insurance portion of the surgery are the responsibility of the patient. Facility rates for the cosmetic portion of the case are adjusted based on performing surgery along with an insurance case. The quotes for these fees will be readjusted if the insurance procedure is not performed.

**All services** will be filed with your insurance plan, regardless of whether we are provider on that plan's provider panel. Please be sure we have complete information so as to avoid delays. Balances not paid or adjusted by the insurance plan will be billed to the responsible party/patient for payment.

**You will receive** statements a minimum of twice a month when there is an outstanding patient balance. Payment is expected upon receipt or it is considered past due.

**In the event of default in payment or if legal action** should become necessary to collect an unpaid balance due for medical services rendered to you or your family, you will be responsible for paying attorney fees, collection agency fees and other such costs as the court determines proper.

**Cosmetic/aesthetic services and skincare product purchases:** There is no guarantee, warranty, transfer, sharing, or refund for products or services provided.

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