

PANAMA CITY PLASTIC SURGERY
RAYMOND A. MOCKLER, M.D., FRCS (C)

FINANCIAL POLICY FOR PATIENT ACCOUNTS

Full Payment is due at the time of service. We accept Cash, Checks, Visa and MasterCard. Patients who provide false or inaccurate information at the time of their visit such as false address or false insurance information will immediately have their accounts turned over to a collections bureau that specializes in fraudulent case collections. **A \$25.00 service fee will be charged on all return checks.**

INSURANCE: You are required to pay all patient responsible portions such as deductibles and co-payments at the time of service. **You should be aware that your insurance policy is a contract between you and your insurance company. As a courtesy we will file your insurance claim but you will be 100% responsible for the charges incurred for evaluation and treatment.**

USUAL AND CUSTOMARY RATES: We charge what is usual and customary for our area. We are not responsible for any insurance company's arbitrary determination of what are usual and customary rates. You may incur charges for services not covered by your plan. You will be responsible for these charges regardless of your insurance coverage.

PAST DUE ACCTS: Patient accounts that are over 60 days past due may be transferred to a collection agency at the discretion of this office with or without notice to the patient or guarantor. Your monthly statement serves as your reminder of your responsibility with past due accts. Patients are responsible for balances left over from partial payments by insurance companies.

There will be a charge for missed or cancelled appointments without 24 hours advanced notice.

Grievance Policy

Panama City Plastic Surgery would like to be informed of any patient grievances. A patient grievance policy is followed at Panama City Plastic Surgery and if you feel you have a grievance, please notify a staff member as soon as possible.

By signing below, I have read and fully understand the above statements.

Patient Signature

Date

Guarantor Signature (if different) Date