

Aurora Audiology & Speech Associates, Inc.
97 Hamburg Street, East Aurora, New York 14052

FINANCIAL POLICY

Your medical insurance is a contract between you and your insurance company. We can often help with providing information to help you in filing claims, but you are primarily responsible for any charges that you have incurred as a patient with Aurora Audiology & Speech.

Copayments: ***All co-pays are due when services are rendered.*** If you are not prepared to pay your copayment, we reserve the right to reschedule your appointment.

Referrals or Prescriptions: If your insurance requires a referral or prescription order from your primary care physician when you see a specialist, it is ***your*** responsibility to obtain a referral ***prior to your appointment.*** If a referral is not obtained prior to the time of service, we reserve the right to reschedule your appointment.

Participating Insurance: If we are participating with your insurance we will submit your claim for you. Upon receipt of payment from your insurance, the remaining balance, deductible, or co-insurance will be your responsibility. The balance will be payable directly by you *within thirty days.*

Non-Participating Insurance: If we do not participate with your health insurance company, *we require the bill to be paid in full at the time of service.* The balance is your responsibility whether your insurance reimburses you or not. You will be responsible for filing your own claim (an itemized bill will be provided for you). Aurora Audiology does ***not*** participate with the following: Worker's Compensation, NYS Medicaid, Fidelis, No Fault Insurance (Automobile). This is not a full and conclusive list.

Returned Checks: There will be a \$40.00 charge for any check returned by your bank for any reason.

Non-covered Services: ***Any non-covered services are payable directly by you.*** Certain charges/services are *usually* not covered by health insurance. Generally, any charges related to the purchase or repair of hearing aids and hearing aid accessories (batteries, ear molds, etc.) are not reimbursable through health insurance. Most insurance policies do not cover cerumen (ear wax) removal. If you think your policy might offer a benefit, please discuss it with our office ***prior*** to your appointment.

Statement Fee/Rebilling Fee: If more than one invoice is required to be mailed to you for payment due, you will incur a \$15 statement/rebilling fee per additional billing.

Delinquent Accounts: Accounts unpaid over 90 days are considered past due. It is our office policy that all past due accounts be sent two statements. If payment is not made, a single phone call will be made to try to make payment arrangements. If no resolution can be reached, the account will be sent to the collection agency, or attorney, and possible discharge from the practice may result.

In the event an account is turned over for collections, the person financially responsible for the account will be responsible for all collections costs including attorney fees and court costs.

My signature below indicates I have read and understand the above information

X
Patient Signature

Date