



Financial Policies

We are committed to providing you the best possible care. Your clear understanding of our financial policies is important to our professional relationship. **PLEASE ASK** if you have any questions about our fees, our policies and procedures, or you need us to explain your responsibilities.

We look forward to a long and healthy relationship with you!

Insurance information

Wake Health Services accepts Medicare, Medicaid, NC HealthChoice and most major insurers. It is **your responsibility to know your insurance plan** and to verify coverage for referrals to other doctors, recommended tests, and laboratories. We make every effort to refer you to providers, labs, and x-ray facilities that are members of most plans, but it is not possible for us to know the details of every plan. **If you are in doubt about what is covered, please call your plan's member services department and check. This office cannot be responsible for out-of-pocket expenses incurred from utilizing the wrong provider or facility, or for undergoing non-covered tests or procedures.**

You are responsible for the co-payment required by your insurance company. We will collect a co-pay from you at the time of your visit prior to receiving services, and then file an insurance claim for you with your carrier. We will bill you for any balances assigned to you by your carrier, including any coinsurance, deductible, and denied charges. You are expected to pay your balance within 30 days.

You are responsible for providing up-to-date insurance policy information and changes in your address and phone number each time you visit us.

Lab Tests and other charges:

Wake Health uses LabCorp for our lab tests, as well as other sources for x-rays, biopsies, PAP smears and cultures. **You will receive separate billing from LabCorp and other companies who perform the processing and evaluation of those tests.** Financial questions should be directed to the telephone number on the lab bill.

For the UNINSURED & MEDICARE patients:

If you do not have insurance or have Medicare, we offer a discount on fees based on family size and income, **for residents of Wake and Franklin Counties only.** To receive services, you must apply for our Discount Fee Program. Please tell the front desk staff and they will assist you with applying for this program.

Payment Requirements:

Payment (or co-payment) is due at the time of services. We accept in-state checks, money orders, Visa, MasterCard and Discover Card.

If your balance exceeds \$200, and you have made no effort to make payments or establish a payment plan for 6 months, we may terminate medical and dental services to you.

If you write a bad check (checks written on insufficient funds), you will be asked to make payment in full within 30 days, including a \$25 return check fee. At that time, as well as for all future visits, you must pay in cash or with a debit/check card or credit card.

Missed Appointments

You are required to give us 24 hours notice if you have to miss, or be late for, your appointment. This allows us to move someone from the waiting list to your slot.

If you miss more than 3 appointments within 6 months, your medical or dental services may be terminated for 6 months.

I have read, and I agree to, the Financial Policies of Wake Health Services.

I understand I am responsible for making payments for my medical care according to these policies.

Name of patient(s) [Please print.]

Name of responsible party if other than patient [Please print.]

Signature _____

Date _____