



Pima Dermatology Policies

Thank you for choosing Pima Dermatology for your skin care needs. Understanding our commitment to you and your financial responsibility to us is essential to establishing and maintaining a strong patient/practice relationship. In order to achieve this, we offer the following information regarding our office policies:

Patient Forms

To help us provide you with exceptional care, we ask that you complete a series of forms to ensure we have current demographic, insurance, medical history, and informed consent information on file.

Prescriptions

All prescriptions are sent electronically or faxed to your pharmacy. If you wish to receive a printed copy of your prescription(s), one of our medical support staff can assist you. Prescription(s) will be available to you based on your pharmacy's hours of operation and may take up to 72 hours to process.

After-Hours Medical Care

Regular office hours are Monday through Friday 8:00AM - 5:00PM. Non-emergency, after-hours medical inquiries will be forwarded to and triaged by our answering service. For all emergencies, please call 911.

Required Fees: Co-Payments, Co-Insurance, Deductibles

All co-payments must be paid at the time of service. This arrangement is part of your contract with your insurance company. Failure to do so can be considered a breach of your contract with your health plan. Co-payments will be collected at patient check-in. We will collect required co-insurance and deductible amounts prior to any surgical procedures.

Cosmetic Procedure Deposits

Cosmetic and elective procedures may require a deposit or payment in full to hold that appointment slot. Full payment is expected at the time of service. *Please be aware that a missed appointment or cancellation with less than a 48-hour notice can result in forfeiture of all or a portion of your deposit.*

Private Pay/Self-Pay Patients

If you do not have health insurance, you will be responsible for all fees associated with medical services rendered at Pima Dermatology. Full payment is due at the time of service. If you are unable to make a full payment, suitable payment arrangements can be discussed with one of our patient account representatives.

Contracted Plans

It is the patient's responsibility to verify if Pima Dermatology is contracted with his/her selected insurance plan and which services are covered. This can be done by calling your insurance carrier prior to your visit. If you are insured by a plan we are contracted with, you will be billed according to guidelines established by the insurance company. If you are insured by a plan we are contracted with but do not have an up-to-date Insurance Card or are unable to provide Proof of Insurance, payment in full for each visit is required.

Non-Contracted or Commercial Plans

Pima Dermatology will file your out-of-network insurance claim as a courtesy. We will ask that you sign an out-of-network waiver before submitting any non-contracted insurance claims. You will want to confirm with your insurance carrier that you have out-of-network benefits and how those benefits affect deductible, coinsurance, and your financial responsibility. Outstanding balances will be billed to you as "due and payable" 30 days after the claim is filed.

Please see reverse side of page.

Proof of Insurance and Identity

We must obtain a photo of each patient using our kiosk system and a copy of your current, valid Insurance Card.

Medicare

Pima Dermatology files claims and accepts assignment on Medicare. We are happy to file all secondary and supplemental claims as a courtesy. In the case of non-contracted secondary carriers, you will be asked to sign an out-of-network waiver and the balance will become patient responsibility 30 days after that claim is filed. If required by your secondary carrier, you will need to obtain referral or authorization prior to your appointment.

AHCCCS/Medicaid

Pima Dermatology is not contracted with any Arizona Health Care Cost Containment Services (AHCCCS) plans. Any patient covered under AHCCCS seeking services at Pima Dermatology will need to sign an out-of-network waiver indicating his or her understanding that he or she is solely responsible for payment. Payment, as with all private pay patients, is due at time of service.

Non-Covered Services/Elective Procedures Deemed Medically Unnecessary

Please be aware that certain services you receive may not be covered and/or may be considered “unreasonable” or “unnecessary” by your insurer. Keep in mind that a medical necessity is not the same as a medical benefit. A medical necessity is something that your insurance plan has agreed to cover. For elective procedures, you may be asked to sign a waiver acknowledging you have been informed that Medicare or your insurance carrier does not cover those particular services and you are solely responsible for payment. Payment is due in full at time of service for non-covered services.

Pathology Fees

Depending upon specific factors, we may send the tissue specimen to an outside reference lab for both slide processing and interpretation. If this occurs, you or your insurance carrier will likely receive a single bill from an outside reference lab in this instance. Sometimes an additional dermatopathology consultation is required for your wellbeing. We reserve the right to send your tissue specimen(s) to the most qualified dermatopathologist to perform a consultation. There will be an additional fee for this service that may or may not be covered your insurance carrier.

No Show and Late Cancellations

All scheduled medical appointments that are not cancelled 24 hours prior may be subject to a **\$40.00** fee. A scheduled Mohs surgery that is not cancelled 72 business hours prior will be subject to a **\$100.00** no show fee. Cosmetic and Laser procedures require a minimum of a 48-hour notice to cancel or reschedule; failure to do so may result in deposit being forfeited.

Past Due Balance

Any balance more than 30 days old will be considered past due. Once a balance is past due, payment will be required prior to your next appointment. We ask that you please make a payment over the telephone when scheduling your appointment. Failure to make payment on a past due balance before your next scheduled appointment will result in the cancellation of your appointment. Once payment is made, you may then reschedule your appointment.

Collection Fees

Delinquent accounts referred to an outside collection agency will be assessed a **\$25.00** collection fee. The guarantor is responsible for any applicable statutory interest and finance charges associated with collection.

Returned Checks

Checks written at the time of your visit or mailed as payment on an account balance that are returned by the bank will be assessed a **\$32.00** Returned Check Charge. The original check amount plus the Returned Check Charge must be paid within 30 days by cash or credit card.