

FINANCIAL AND INSURANCE POLICIES

If you have medical insurance, we will help you receive the maximum allowable benefits. In order to achieve this, we need your assistance and understanding of our financial and insurance policies.

FINANCIAL POLICY

Your co-pay is due at the time of your office visit. If we participate with your insurance company, we will file your insurance claim for you. You will also be responsible for any portion that your insurance company does not pay and deems your responsibility.

Surgery pre-payment: Any amount not covered by your insurance company is due no less than 5 days prior to your surgery. Once your procedure is pre-authorized and scheduled, you will receive notification from our office stating the amount you are responsible for prior to your surgery. If we do not receive your payment, your surgery will be cancelled and/or rescheduled.

Please be aware that pre-authorization from your insurance company does not guarantee payment. If you have any questions, you should contact your insurance company prior to having any procedures.

I hereby assign all medical benefits to which I am entitled to make direct payment to Donen Davis Plastic Surgery, LLC. I understand that I am responsible for payment of all co-pays, deductibles, or non-covered services at the conclusion of each visit. I understand that my insurance company may not cover certain services and that I may be responsible for payment of those services upon being billed.

Initials

REFERRAL AUTHORIZATION

If your insurance requires a referral authorization from your primary care physician, **YOU ARE RESPONSIBLE FOR OBTAINING THIS PRIOR TO YOUR VISIT.** If you have not done so, you have the option of rescheduling or making payment in full for the amount of the service rendered.

ELECTIVE COSMETIC SURGERY FINANCIAL POLICY

Our staff will provide you with a surgical estimate of the cost of your procedure. **All cosmetic procedures must be paid in full two (2) weeks prior to the date of your surgery.** We accept cash, check, Visa, MasterCard, Discover and American Express. If we have not received your payment, the surgery will be cancelled.

FINANCIAL ASSISTANCE

Donen Davis Plastic Surgery does offer payment plans for patients. We will be happy to schedule a payment plan with you to allow for monthly payments over either a three (3) or six (6) month period. In order to make monthly payments, we will need a credit card or debit card number to charge your monthly payment. Our staff will provide you with an authorization form stating each payment amount and the date for each payment. Additionally, there will be a one time service charge of \$25.00 for the payment plan. Any balance remaining after six months will be forwarded to our collection agency regardless of previous payments.

I have read and understand the above policies of Donen Davis Plastic Surgery, LLC and agree to fulfill all obligations as outlined above.

Patient / Responsible Party Signature

Date