

## Financial Policy of New West Physicians Effective January 1, 2019

We are dedicated to providing excellent service, every patient, every time. The following information is provided to ensure clarity and avoid misunderstandings concerning payment for the professional services you need.

While our office participates in most health plans, the following are reminders:

- **It is your responsibility to verify that New West Physicians participates with your health plan prior to scheduling your visit.**
- **It is your responsibility to verify what services (lab, diagnostic testing and preventative) are covered under your health plan.**
- Bring your insurance card with you to each visit and be prepared to update your health information.
- Be prepared to pay your insurance co-pay at the time of your visit as well as any previous, outstanding balance on your account.

### Co-Payments

- Commercial Plans With Established Co-Pays – The co-pay amount listed on your insurance card is due in full at time of service. If a co-pay is not listed, contact your insurance plan prior to your visit to determine the amount due at time of service.

### Self-Pay Patients

- Patients Without Insurance - The estimated charges of the visit are due at the time of service. At that time, a 20% discount will be applied.

### No Shows and Cancellations

When you schedule an appointment, we set aside enough time to provide you with the highest quality care. Should you need to cancel or rescheduled an appointment, please contact our office as soon as possible, and no later than 24 hours prior to your scheduled appointment.

- 1<sup>st</sup> and 2<sup>nd</sup> no show or cancellation/reschedule without a 24 hours' notice will be charged a \$50 fee at our Primary Care Offices and a \$75 fee for the Specialty Center
- 3rd no show or cancellation/reschedule without a 24 hour notice will result in dismissal from New West Physicians

**I have read and understand the Financial Policy of New West Physicians and agree to its terms.**

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Patient Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

New West Physicians does not discriminate on the basis of race, color, national origin, sex, age, or disability in its health programs and activities. ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Please call 303-763-4900 Ext. 10564. ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al 303-763-4900 Ext. 10564.

請注意：如果您說中文(Chinese)，我們免費為您提供語言協助服務。請致電：303-763-4900 Ext. 10564. REV 8/2019