

**Santa Lucia Medical Group, Inc.
Family Medicine**

Financial Policy

Thank you for choosing Santa Lucia Medical Group as your Primary Care provider. We are committed to providing you with the best possible care. In order to offer you the best possible service; we are providing information regarding our billing policies. Please read this information and sign below.

Payment is required at the time of service. We accept cash, check, or credit card. Santa Lucia Medical Group Inc. charges a \$25 fee for all non-sufficient funds checks.

It is the policy of Santa Lucia Medical Group, Inc. to obtain social security numbers on all responsible parties. Also for security reason we require identification of at least one parent or guardian.

For **patients with no insurance**, full payment is required at time of service. You can establish credit after paying your first three consultation or your first \$500 out-of-pocket expenses.

We accept select **HMO plans**; co-payment is required at the time of service. The amount of co-payment varies with different plans. You are responsible for knowing the **co-payment** amount and **primary care physician** listed on your insurance card.

For patients with **PPO plans**, payment is required at the time of service until the New Year's deductible has been met after that, we require co-payments or your liability to be paid at time of service.

While the filing of insurance claims is a courtesy that we extend to our patients, all **charges not covered by your insurance company are your responsibility**.

Balances are due upon receipt. Statements are mailed every 15th of the month. Patient due balances accrue a monthly finance charge of 1.5%. Statements unpaid for more than 90 days may be turned over to a collection agency unless other arrangements have been made. Accounts that are turned over to collections may result in dismissal from the practice.

If special circumstances make immediate payment impossible, payment arrangements must be approved in advance by our business office staff.

Missed appointments: Unless canceled at least 48 hours in advance, there **will** be a charged for missed appointments. Please help us serve you better by keeping scheduled appointments. Multiple missed appointments may result in dismissal from the practice.

Santa Lucia Medical Group, Inc. does not accept most HMO plans, Worker's Compensation injuries, personal injuries involving third party liability, Medi-care or State Medi-cal.

I have read the above financial policy, I have understood it, and I agree to it. I have also received a copy of this financial policy at my request.

Patient's Name: _____ Date: _____

Patient or Responsible Party Signature:
