

GRAND RIVER FAMILY CARE – FINANCIAL POLICY

Welcome to Grand River Family Care

We are pleased to have you as our patient. GRAND RIVER FAMILY CARE is dedicated to providing quality, accessible, and cost effective health care services to our patients and we strive to make every visit a positive experience. This information was designed to provide our patients with a detailed explanation of our financial policies. We realize this information may not always address your specific situation and encourage you to speak with a member of our staff whenever you have any questions or concerns regarding your account.

Registration

The registration process is a vital link in your visit to GRAND RIVER FAMILY CARE. Information gathered provides us with contact information as well as ensures your claims will be filed to the correct insurance company.

Upon arrival at any GRAND RIVER FAMILY CARE, you will be asked for basic information:

- Current patient information: name, address, telephone number, social security number, and emergency contact.
- Current insurance card and driver's license.

Please arrive at least 15 minutes prior to your appointment time. Having information readily available will assist us in making the check-in process easier for you. Information obtained in the registration process is kept in your confidential medical record.

You will be asked to make co-payments at the registration desk at the time of service.. We accept cash, check, debit cards and major credit cards (MasterCard, Visa, Discover, American Express and HSA cards).

Co-payments

Co-payments will be collected at the time of your visit. Please check with your insurance company for the requirements and provisions of your policy to determine the dollar amount of your co-payment prior to your appointment.

High Deductible Insurance Plans – If you have an insurance plan which requires a high deductible/out of pocket amount and you have not reached that amount, payment for the “office visit portion” will be due on the date of service. The balance due will then be billed to your insurance company.

Families Divided by Divorce

We at GRAND RIVER FAMILY CARE understand that these situations require special handling. All efforts will be made to comply with your instructions regarding the billing. However, with the numerous problems that arise in divorce cases, the clinic cannot act as administrator to resolve financial arrangements. The parent with whom minor children live with will be considered the responsible party and will receive all billing statements and correspondence. Both parents are legally responsible for the account balance.

Dependents

For your convenience, our statements show current account information for any family member who has used GRAND RIVER FAMILY CARE. Once a patient becomes eighteen, an account will be established in his or her name.

NSF Checks

There will be a \$20.00 charge for all returned checks.

Form Fees – There is a \$25.00 fee for completion of FMLA or Disability paperwork, Handicap Parking Permit, School/Daycare Forms or any other type of form. Any additional extended paperwork could result in an additional charge.

Collection Accounts – If your account is turned over to a collection's agency for non-payment, there will be additional fees assessed to your account which the patient will be responsible for. Tier 1 collection accounts will be assessed a \$50.00 fee. Tier 2 collection accounts will be assessed a \$75.00 fee.

Late Policy – Please be sure to come to your appointment on time so we can avoid delaying other scheduled appointments. If you arrive more than 10 minutes for your appointment, you may be asked to reschedule.

No Show Policy – Patients who schedule appointments but fail to show up are documented as “no show.” If you cannot make it to your appointment, please notify us at least 24 hours prior to your scheduled time. This will allow us to offer your appointment to another patient. A patient who “no shows” more than two times may be dismissed from the practice. A \$40.00 no show fee will be charged to any patient for a no show appointment.

Liabilities

GRAND RIVER FAMILY CARE does not protect third party liability charges. It is the obligation of the responsible party to settle any outstanding liability charges. GRAND RIVER FAMILY CARE cannot act as administrator to resolve financial arrangements. The balance for services rendered is considered due in full at the time of the services.

Participation with Insurance Companies

GRAND RIVER FAMILY CARE reserves the right to determine which insurance companies or programs we participate with on an annual basis.

General Insurance Policy

As a convenience to you, our Billing Department will file a claim on your behalf provided we have your current insurance policy information available. However, it is impossible for our staff to determine your coverage and payment levels, since each insurance company offers many options as part of their health care coverage package.

Our staff cannot guarantee that your insurance carrier will pay all or even part of your claim. Your insurance policy is a contract between you and your insurance carrier. Ultimately, the patient is responsible for their GRAND RIVER FAMILY CARE charges. Patients should resolve disputed coverage issues directly with their insurer or employer. It is the patient's responsibility to know the details of their insurance contract and if GRAND RIVER FAMILY CARE is a network provider for their particular plan.

When your insurance company processes your claim they will provide you with an Explanation of Benefits (EOB). This EOB will explain what the insurance company has agreed to pay. Most insurance companies agree to pay only a percentage of the charges with the remaining balance being the responsibility of the patient. The EOB may use the term “Usual, Customary and Reasonable” (UCR). Insurance companies develop UCRs independently of one another. GRAND

RIVER FAMILY CARE maintains only one fee schedule and it is developed independently of the insurance company UCRs. Therefore, because of policy deductibles, co-payments, non-covered services and UCRs, you may have a balance due after insurance pays. No UCR adjustments will be honored unless the clinic has a signed contract in effect with that specific insurance carrier.

Medicare Policy

Federal law requires all physicians to file claims to Medicare.

GRAND RIVER FAMILY CARE accepts Medicare assignment. This means we agree to accept Medicare's allowance on services provided to you. You will still be responsible for your annual deductible, the co-payment, and any non-covered services specified by Medicare.

If you carry a supplemental plan to Medicare, please be sure we have your policy information so that a claim can be filed for you.

Medicaid

All Medicaid patients must present a valid stamped card prior to being seen. Our office will make attempts to verify that the Medicaid is active for the date of service. If we are unable to verify Services will be billed to the Medicaid product presented. If coverage is denied or not paid by any Medicaid product for any services rendered, the patient is responsible for payment of that amount.

eligibility, you will be asked to reschedule the appointment or make payment at time of service.

General Credit Policies

All accounts are payable upon receipt of your first statement. Credit is extended as a courtesy, and arrangements will be based on demonstrated needs.

If you are not covered by a medical insurance plan payment is expected at the time services are provided.

Payment in full or the amount not covered by your insurance carrier may be required prior to receiving care if you have a present/previous clinic account turned over to a collection agency, you currently have an overdue balance, or if you have a recent bankruptcy case.

Questions Regarding Your Account

if you have questions regarding your account please contact our billing office at the following telephone number:

Billing questions:

Grand River Family Care

Monday through Friday

8:00 a.m. – 4:30 p.m.

517-339-2116 (Leave a message on the billing line and you will receive a call back within 48 hours)

Thank you for your cooperation in helping us serve you with the highest quality, accessible and cost effective health care services.

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