



Financial Policy Notice

Hunterdon Otolaryngology and Allergy Associates (HOAA) appreciates the opportunity to serve your needs. This document details our policy with regard to fees and reimbursements for services rendered. It is provided as a service to ensure you understand your financial obligations related to the care provided by HOAA. It is ultimately your responsibility to understand and comply with the terms of your insurance coverage and determine your level of benefit coverage as delineated by your insurance policy. For your convenience, we accept cash, check and all major credit cards.

We understand and are compassionate to the stress that medical evaluations and treatments cause. The emotional, physical and financial burdens can be overwhelming. It is for this reason that HOAA clarifies its financial requirements at the outset, empowering you with knowledge regarding your financial obligations prior to entering our practice. If you have questions or concerns regarding your financial obligations or the information presented in this document, please contact us.

Everyone has a personal and financial interest and responsibility in understanding his or her health insurance. You pay the premium for your health coverage, either directly or as part of your employment benefit package. There are hundreds of different options for health insurance; and benefits vary for each individual policy. Your insurance company will provide you with a plain-language benefit summary detailing covered and non-covered benefits, limitations on benefits, required co-payments or deductibles, and the need for referrals. Please be aware that it is your responsibility to know if you need referrals, and if so, to obtain them in advance of your appointment. Some insurance companies require you to get a second physician's opinion or an insurance pre-certification (sometimes called an authorization or notification) before a service is rendered. Please remember, your insurance policy is a contract between you and your insurance company.

Our office will assist you with filing claims with your insurance company and with obtaining pre-certification. Please be aware that pre-certification does **NOT**

- guarantee benefits,
- verify eligibility,
- determine if a condition is pre-existing,
- determine if a second surgical opinion is required, or
- eliminate your deductible or co-insurance.

Based on the above, you can see that a pre-certification does **not** guarantee that your insurance will pay for a rendered service. It is your responsibility to know your benefits. It is your responsibility to pay any yearly deductibles, co-payments, co-insurance, non-covered services or any other balance left unpaid by your insurance company.

Services & Fees

Often, during office visits, our physicians may need to perform additional procedures or tests such as nasal/laryngeal endoscopies or comprehensive hearing tests. The completion of these tests may be necessary for our physicians to diagnose your condition. Deductibles and co-insurance may apply in accordance with your insurance policy.

We know that questions can arise on insurance matters. Please feel free to speak with our Billing Specialists to discuss your questions.

Patient Payments

We gladly accept cash, check and all major credit cards. Online payments may be made directly from our website link or at <https://pay.instamed.com/huntoto>. Additionally, we offer automatic payment plans when the need arises. Please contact our Patient Billing Specialist at (908) 788-9131 ext. 241 for additional information.

Participating Provider and Covered Benefits

If HOAA is a participating provider and the services requested are covered benefits, we will bill your insurance carrier directly. Referrals, if needed with your insurance, are required at the time service is rendered. Co-payments, deductibles and fees for non-covered services must be paid at the time service is rendered.

Non-Participating Provider and/or Non-Covered Benefits

If HOAA is not a participating provider with your insurance carrier, or the services to be rendered are not covered benefits, we require full remittance at the time a service is rendered or prior to the commencement of a service, depending on the nature of such care. Upon request, we will provide you with an itemized statement for your records and appropriate forms that you may submit for reimbursement.

Surgical Procedures

For elective surgical procedures, we will contact your insurance carrier to determine coverage of benefits and obtain any pre-authorization. All co-payments, deductibles, co-insurance and fees for non-covered services will be collected prior to your scheduled surgery. If payment is not received by this time, your surgery will be cancelled and/or rescheduled.

Non-Sufficient Funds

Any check returned for non-sufficient funds or account closed will be assessed a \$40 processing fee. Failure to pay in full within 10 days of the date of billing will result in your account entering into Collection proceedings. You will be responsible for all costs incurred by HOAA in our effort to obtain reimbursement for services provided.

Broken Appointment Policy

HOAA maintains a strict policy regarding broken appointments. A broken appointment is defined as any reserved block of time scheduled for a patient which that patient either verbally

cancelled less than 24 hours before the scheduled appointment or just “no shows” without any advanced notification.

As a courtesy to our patients, we use an automated confirmation system to confirm a patient’s appointment one to two days before the reserved time. When appointments are not cancelled in a timely manner, our practice is unable to fill them with other patients who are eager to be cared for in our practice. Before rescheduling a patient who had a broken an appointment, our office may insist upon receipt of a \$25.00 broken appointment fee. For your convenience, we accept cash, checks, and all major credit cards.

If a patient breaks an appointment three times, then he/she may not be rescheduled without the approval of a physician and the Practice Administrator.

It is necessary for us to enforce this policy in order to be fair to all current and future patients. This policy will decrease the waiting time for all patients and help ensure availability and prompt medical care. We understand that a situation may arise that may not permit you to give us a 24 hour cancellation notice. Exceptions to this policy will be determined on an individual basis according to the circumstances.

Medical Forms

There may be a charge for completion of all forms.

Medical Records

Medical records created by HOAA will be released only with your expressed written consent after completing the appropriate authorizations to release health information in compliance with federal and state laws. Medical records sent to HOAA cannot be re-forwarded even with consent. According to New Jersey State regulations (NJAC 8:43G-15-3), a copying fee shall not exceed \$1.00 per page or \$100.00 per record for the first 100 pages. For records that contain more than 100 pages, a copying fee of no more that \$0.25 per page may be charged for pages in excess of the first 100 pages, up to a maximum of \$200.00 for the entire record.

In accordance with HIPAA regulations, you have the right to review your medical records. You must request in writing for an appointment to review your medical records. There is \$75/hour fee (1-hour minimum) to supervise and ensure the integrity of the medical record while you review your chart.

Thank you for your understanding and cooperation.

The Physicians and Staff of Hunterdon Otolaryngology and Allergy Associates