

## OUR COMMITMENT TO CARE

Thank you for choosing AURORA AUDIOLOGY as your hearing health care provider. Your understanding of our Financial Policy and payment for services is important for establishing a transparent clinic-patient relationship. For your convenience, this document discusses a few commonly asked financial policy questions.

All patients are required to read and acknowledge understanding of this policy, prior to services being rendered. Acknowledgement will be required annually and/or when there is a change to your insurance provider or this policy. If you need further information or assistance with any of these policies, please ask to speak with our business owner.

### WHEN ARE PAYMENTS DUE?

All applicable co-payments and co-insurances, unmet deductibles, charges for non-covered services, and past-due balances are due at the time of check-in unless previous arrangements have been made with our business owner.

### HOW CAN I PAY?

We accept payment by cash, check, VISA, and MasterCard. A 4% credit card fee may apply.

### DO I NEED A REFERRAL OR PRE-AUTHORIZATION?

If your insurance plan requires a referral from your primary care physician or a pre-authorization from your insurance, you will need to contact your primary care physician or insurance company to be sure it has been obtained. If we have yet to receive authorization prior to your appointment time, we will reschedule. Failure to obtain the referral or preauthorization may result in a lower or no payment from the insurance company, and the balance will become the patient's responsibility.

### WILL YOU BILL MY INSURANCE?

Insurance is a contract between you and your insurance company. In most cases, we are not a party to this contract. We will bill your insurance company/companies on your behalf as a courtesy to you. To properly bill your insurance company, we require that you supply all insurance information, including primary, secondary insurance, and any other insurance and the name and date of birth of the insured.

**It is your responsibility to notify our office promptly of any patient information changes (i.e., address, name, insurance information) to facilitate appropriate billing for the services rendered to you.** Failure to provide complete and accurate insurance information may result in the entire bill being categorized as patient responsibility.

Although we may estimate what your insurance company may pay, it is the insurance company that makes the final determination of your eligibility and benefits. Your insurance company may offer an appeal process for denied claims. We will not under any circumstances falsify or change a diagnosis or symptom to convince an insurer to pay for care that is not covered, nor do we delete or change the

content in the record that may prevent services from being considered covered.

We cannot offer services without expectation of payment. You will be notified, in writing, of the estimated charges of non-covered items or services prior to the item being dispensed or services being rendered. You will not receive non-covered items or services if you do not accept financial responsibility. The costs associated with non-covered services are due on the date of service. If you are unsure whether a service is covered by your plan, ultimately, it is your responsibility to call your insurance company to determine what your schedule of benefits allows, if a deductible applies, and your potential financial responsibility.

### WHICH PLANS DO YOU CONTRACT WITH?

Aurora Audiology accepts most major insurance plans. **We are in network with Medicare, Medicaid, and TriCare. We are not in-network with Medicare Advantage Plans. Note: Hearing device benefits are often unaffected by in or out of network status but may be subject to a separate deductible and/or out-of-pocket co-insurance.**

As a courtesy, we will attempt to verify coverage with your insurance company/companies. However, with the frequent changes that happen in the insurance marketplace, it is recommended that you contact your insurance company prior to your appointment and verify coverage for any audiology-related services.

### WHAT IF MY PLAN DOES NOT CONTRACT WITH YOU?

If we are out of network with your insurance, payment in full is due on the date of service. Any payments sent to our office, after the claim is submitted to the insurance, will be refunded to you.

### WHAT IS MY FINANCIAL RESPONSIBILITY FOR SERVICES?

It is your responsibility to verify that the providers and the practice where you are seeking treatment are listed as authorized providers under your insurance plan. Your employer or insurance company should be able to provide a current provider listing.