

Tennessee Valley Cardiovascular Center
541 West College Street, Suite 1100
Florence, AL 35630
256-766-2118

Financial Policy

Thank you for choosing Tennessee Valley Cardiovascular Center as your healthcare provider. We are committed to providing the best medical care possible. Please understand that payment of your bill is considered a part of your treatment. The following statement explains our Financial Policy, which we ask you to read, sign, and return to us prior to your treatment.

- All patients should provide accurate and complete personal and insurance information prior to being seen by the doctor.
- All applicable co-pays and personal balances (both current and prior) are due at time of service.
- We accept cash, check, credit, or debit cards (Visa and MasterCard).

Regarding Insurance

We participate in Medicare and most major insurance groups. In most cases we accept assignment of benefits but in all cases we require that the guarantor, the person who is financially responsible, is *personally* liable for any balance not covered by insurance. It is your responsibility to understand and comply with any predetermination of benefits or referral requirements. Please be aware that some, and perhaps all, of the services provided may be non-covered services or may not be considered medically necessary under the Medicare program or by other medical insurance companies.

Usual and Customary Rates

We are committed to providing the best treatment for our patients and we charge what we believe to be reasonable and customary fees for our region and specialty. If your insurance company uses a different fee schedule, you will be responsible for any balance remaining.

Past Due Accounts

Overdue accounts will be referred to a collection agency. It is not our desire that any account be turned over to an outside collection agency. However, if no reasonable effort has been made by the patient to make payment arrangements in a timely manner, then we will do so at that time. Collection fees that we pay to secure past due balances will be added to your account. This fee is 30% of your balance.

Co-Pay Balances

Payment for co-pays is expected at time of service. If it is not possible to pay your co-pay on the date of service, you must speak with an account representative before your visit. This fee is *not* covered by insurance so it will be your personal responsibility.

Returned Checks

For checks returned as unpaid by your bank, we will charge a rate equal to the amount the bank charges TVCC.

DO NOT write on this policy other than the Signature line below. If you do not agree or are confused with statements in this policy, please speak with our Business Office Manager for clarification **BEFORE** treatment is rendered. Again, thank you for choosing Tennessee Valley Cardiovascular Center. We look forward to serving you.

I have read the Financial Policy. I understand and agree to the Financial Policy.

Print Name

Signature

Date