



Our Financial Policy

Has anyone noticed that insurance and medical billing is often as clear as mud? Here is our best attempt to demystify this complex system.

- We are a private clinic, fully owned and operated by Dr. Jennifer Dharamsi. When you come in for a medical visit, we are personally providing the space, the supplies, the staff, the labor, and the expertise in order to serve your needs. **We pay for all of this up front, with the hopes of receiving a “reimbursement” for our work from your insurance company, or in some cases, from you.** Very few other business industries operate with this model of providing a full service without any guarantee of payment...but this is healthcare, and we have no choice, unless we were to opt out of taking insurance, which we would hate because it would interrupt our ability to serve our current patient population. If we are being honest, it gets very expensive to run a clinic, so it's important for us to be paid for our services so that we can stay in business and continue to serve our community.
- According to insurance regulations, if we are in-network with your insurance, **we are not allowed to collect any more or any less than your particular insurance plan’s “allowable” amount for a particular service.** We carefully document all details from our encounter with you in order to justify being reimbursed that allowable amount. What this means is that unlike most industries, **we don’t get to set our prices**—your insurance company sets them for us. The only scenario in which we are allowed to set our own “cash” price is for services not covered by your insurance plan, such as for cosmetic / elective treatments.
- Unfortunately, knowing the details of your coverage is easier said than done. That’s because **every single person’s insurance coverage is different**, depending on the plan you selected. We pay a dedicated staff member to tediously look into and verify each patient’s insurance plan ahead of time in order to have the best estimate of what your plan covers, and what it doesn’t, how much is remaining on your deductible, what your co-insurance is, etc. (see below for an explanation of these). **Please note that despite our best efforts, we are at the mercy of your insurer to provide us accurate information, so our verification of your benefits is usually just our best estimate of your coverage and may not be 100% accurate.** Although we participate in your plan, **you are responsible for any charges your insurance company deems “patient responsibility.”** Here are the different aspects of what your plan may cover:
 - **Office visit:** This is the payment to the clinic for your evaluation and management. This covers the cost of the provider and staff’s time, space, supplies, and expertise. The level of “code” that we use for your visit will depend on the number, severity, and extent of the problems you have. The coding system is complicated, but trust us that we are very careful to code fairly and honestly, and if in doubt, we always down-code. For some people’s plans, your portion of the office visit charge is covered by a **co-pay**. For other plans, the cost of the office visit **goes towards your deductible or coinsurance**, which means you might personally owe for the full cost of the office visit charge. **Note that the amount that you will owe for your office visit will be collected when you check out.**
 - **Procedures:** If your plan is like most, medically-necessary procedures are “covered” by your plan, but only after you have met your **deductible**. This means, for example, that if you have an unmet \$3,000 deductible and you need a same day biopsy or other procedure in our office, **you will be personally responsible for paying for the cost of that procedure in full** until you’ve spent \$3,000 out-of-pocket for the year. After your deductible is met, most people have a **co-insurance**. For example, if you have an 80% co-insurance, this means that after your deductible is met, your insurance covers 80% of all procedure costs, while you are responsible for 20%. **We will calculate an estimate and collect the amount that you will owe for any in-office procedures at the time of check-out.**
 - ✦ We know that no one likes surprises, so we will do our best to provide you with an **estimated quote** for any out-of-pocket charge you may incur **prior** to performing any procedure during your visit. Please note, again, that **this is only an estimate** based on the most up-to-date information your insurance company provided us when we verified your benefits. Once the claim is sent to your insurer, they may determine that you actually owe a little more or a little less than what we collected. **If you overpaid, you will have a credit on**

your account with us to be used towards your next visit, or we can issue you a refund check at your request. **If you owe us more, we will collect the difference owed at your next visit, and/or we will send you a statement.**

- ✦ If you have a health savings account (HSA), you can use those funds towards paying your co-pays, deductibles, and co-insurance. Unfortunately, HRA's cannot be used towards cosmetic / elective procedures. If you have CareCredit, you may use it towards paying for both medical and cosmetic / elective amounts to our clinic with the standard interest terms.
- **No-Show and Cancellation Policy:** Please know that we are dedicated to giving the best care possible to all our patients. To do this, we must have some policies in place regarding appointment no shows and cancelations. If you know you are not going to be able to make it to an appointment, please call the office as soon as possible to cancel or reschedule. We have many patients wanting to get an earlier appointment and the sooner we can accommodate them the better. If you do not cancel your appointment with at least a 24-hour notice from your appointment time a \$40.00 fee will be charged to your account. If you no show for an appointment, a \$50.00 fee will be charged to your account. If you no-show more than three time in a year we reserve the right to take a nonrefundable deposit to schedule future appointments.
- **Product Sale Policy:** Products are a wonderful way to treat many dermatologic and aging needs. At Legacy Dermatology, we have personally vetted all the product lines we sell. While dermatology is a science, patients may still react differently to treatment and products. We try our very best to recommend the right product for each patient's skin type, but you as the patient need to use the products as recommended to see the best results. Compliance in your medical treatment is very important and if you have any questions please call us! **Please be aware that all sales are final.**
- Sometimes cosmetic treatments need to be performed in a series to see optimal results. We may offer packages of treatments at a reduced cost to help you get the best result and save a little money along the way. If you decide at any time during the treatments cycle that you want to discontinue treatment, your previously performed treatments will be considered singles and the price will be adjusted. For example, if you purchase a package of four laser hair removal for \$400 and after two treatments decide you no longer want the treatments, we will adjust the preformed treatments to the regular price of \$150 and you will be given a credit of \$100. **You may be asked for a deposit on procedures that require a 45-minute block of time or more.** This deposit will be applied to the cost of the treatment or any fees associated with the visit.
- **After-Hours Emergency Line:** In an effort to provide all patients with exceptional care, we offer an emergency on-call line. If you are having a medical emergency that needs immediate attention, please call 911 or go to your local treatment facility. This service is provided to patients for medication reactions, or concerns following a surgery after hours and on the weekends. Please be aware that this line is not for medication refills, making appointments, or any other requests that can be taken care of during normal business hours. **There may be a fee of \$50 associated with any call that is deemed non-emergent.**

So, in summary, this is a very complex and challenging system! We are truly making every attempt to make this process as smooth as possible for our patients. We pledge to do our best, and we hope you will show us grace as we navigate this process together.

Sincerely,

Dr. Jennifer Dharamsi & Staff

*By signing the "Acknowledgement of Policies" section of the "Acknowledgement of Policies and Consent for Treatment" Form, you are acknowledging your understanding of all of the above financial policies. A copy of this financial policy sheet can be provided for you upon request.