

WEINSTEIN IMAGING ASSOCIATES

BILLING POLICY

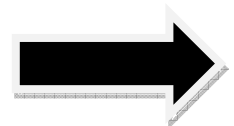
PLEASE READ THIS DOCUMENT THOROUGHLY, AND INITIAL AND SIGN WHERE INDICATED.

- Please note that it is the **PATIENT'S RESPONSIBILITY** to know the insurance benefits and coverage you have prior to having services at Weinstein Imaging Associates.
- If you have questions regarding your financial responsibility or coverage of services at Weinstein Imaging, please contact your insurance carrier in advance of services. Weinstein Imaging assumes no liability for any in-network/out-of-network benefit information misquoted by your insurance carrier or any other information deemed to be inaccurate.
- If you or the guarantor work for a healthcare system (ex: Allegheny Health Network, UPMC, Excelsa Health, Heritage Valley Health System, Butler Health, etc...) you may be responsible for higher out of pocket expenses at our office due to Home-Host coverage. By having your imaging with us, you could experience a lower level of benefits (Standard Level and/or Level 2 benefits) as compared to the network where you are employed.
- In most instances, we will bill your insurance carrier within one week of your visit. Patients are responsible for the amount owed based on your insurance contract with your insurance carrier. You will be responsible for all co-payments, coinsurances, and deductibles after your insurance has processed your claim. Anything denied by your insurance and listed as billable is your responsibility.
- If after 60 days, your insurance company has not processed the claim, the responsibility will default to the patient, and direct billing to the patient will begin.
- We will bill for balances due (co-pays/coinsurance/deductibles) and expect all accounts to be paid within the initial billing cycle. If payment is not received after 60 days, collection proceedings will begin. A 1% finance charge will start to accrue after 60 days.
- If you are unable to pay your balance in full, our billing office (412-440-6997) can arrange a payment plan for you, which will require regular monthly payments. With this plan you **MUST** pay the agreed upon amount **EVERY** month. If a payment is missed, your account will default to collection proceedings. Please contact our billing office to initially set up this payment plan.
- If you have secondary coverage, we will also bill this insurance for you. Again, after 60 days, any unpaid balance becomes your responsibility.

CASH ACCOUNTS:

If you do not have insurance coverage or we do not participate with your insurance carrier, 50% of the total charges are due on the date of service and regular monthly payments thereafter are required. A 1% finance charge will start to accrue after 60 days.

OVER



MEDICARE PATIENTS:

Medicare patients are responsible for paying their annual deductible each year (if it is applied to your visit with our office), and are responsible for the 20% allowable charges not paid by Medicare thereafter. If you have secondary coverage, we will also bill this insurance for you. If after 60 days, the secondary insurance does not cover this portion of the balance, our office will bill you directly.

MEDICAL ASSISTANCE:

We are NOT participating with medical assistance programs. If this is the case, we recommend that you seek services with a *participating* facility.

UPMC HEALTH PLAN:

While we participate with many UPMC Health Plans, including UPMC for You, there are some exclusions, including those purchased through the HealthCare Marketplace (Select, Partner and Tower Networks, Total Advantage). In addition, for Level 2 plans (including, but not limited to, UPMC Employee Advantage, Panther Gold Advantage, UPMC Inside Advantage, and MyCare Advantage), your benefits are *reduced* and you will have more out-of-pocket expense. While Weinstein Imaging is in-network with these plans, patients can expect more out-of-pocket expense at our facility. Please know that if your plan considers us “out of network” or excluded, then you will also incur out-of-pocket expense.

Please initial here to acknowledge that you have fully read/understood this entire section _____

WORKERS' COMPENSATION:

If your visit is due to Workers' Compensation, we will assist you in billing the liable carrier and will hold balances for 60 days from the date of service. After that time, if the balance has not been paid in full, you will be responsible for the account.

BREAST IMAGING SERVICES:

Patients are strongly encouraged to check with their insurance carrier regarding coverage for screening mammography below the age of 40. In many cases, coverage for screening mammogram begins at age 40.

Most insurances cover 3D (Tomosynthesis) mammography. Please check with your insurance carrier if you have any questions regarding coverage under your insurance plan. In the event 3D mammography is not covered, you will be responsible for the applicable charge.

PLEASE SIGN BELOW INDICATING THAT YOU HAVE READ AND UNDERSTAND OUR BILLING POLICY:

Patient Signature (or Guardian if patient is a minor)

Date