



ODAM MEDICAL

SPECIALIST IN PRIMARY CARE MEDICINE AND COMMUNITY HEALTH

Patient Financial Policy

Thank you for allowing us to care for you and your family. This will explain our financial policies and your responsibilities related to your care and treatment.

Patient Identity Verification

To protect your identity and private health information, please be prepared to show photo identification (driver's license or other photo identification) when you check in for your visit.

If you have further questions regarding our goals for preventing and detecting medical identity theft, please ask our reception staff for more information.

Insurance Billing

We submit claims to your insurance carrier on your behalf for the medical services that we provide to you based on the insurance information that you provide to us. We accept many insurance plans but cannot guarantee their coverage of our services. You are responsible for verifying coverage and benefits of your individual policy. We will verify your insurance policy eligibility and basic demographics at each visit, and you are responsible to have current insurance Card available when you present. Summary requirement.

- Insurance card must be presented at check in
- Co-Pays are due at the time of service.
- You are responsible for any amounts not covered by your insurance plan due to co-insurance, deductible, or non-covered services.

Patients with No Insurance

Uninsured patients may pay on the date of service and receive a "same day discount" which is a 20% discount on charges. If your total charges are less than \$80, you will be expected to pay in full at the time of service. Without knowing the exact care that will be provided prior to the actual visit, the final discount amount is determined and paid at the completion of the visit. If your charges exceed \$100 you may make a \$100 deposit and enroll in an auto payment plan, which allows us to set up a monthly credit/debit card payment.

To enroll you must notify our Business Office to set up acceptable payment arrangements. The minimum monthly payment is dependent upon your account balance. Please contact them at (612)871-2312 Monday-Friday from 9am to 4pm.

Past due accounts

Balances due are to be paid in full when your statement indicates unless you set up an acceptable payment arrangement with OMG. Monthly payments are expected on balances due, or the account will be considered past due. If you neglect the terms of a payment arrangement without contacting us further, we could provide you with a “final notice” and turn your account balance to an outside professional collection agency. Once we turn your account to the outside professional collection agency you will be in a minimum \$50.00 “deposit” status regardless of insurance coverage. That deposit will be required at the time of registration for your appointment. (Medicaid patients are exempt from this deposit requirement) You will remain in a “deposit” status until you re-establish your reliability to follow our payment expectations. Our Business Office is available to set up acceptable payment arrangements or assist you with any questions regarding your account or insurance billing. Please contact them at (612)871-2312 Monday-Friday from 9am to 4pm.

Payment Methods:

For your convenience, we have several payment methods available to you including online bill payment.

- Cash
- Check
- Credit/Debit Card
- HSA Card

Monthly Statement:

Every patient has their own account, regardless of the age of the patient. The guarantor (also known as head of household) of a minor child will receive the monthly statement for that minor child. Thus, a family would receive more than one monthly statement based on the number of family members with an open balance on their account. Statements are only generated once the account has been processed by insurance, or after a \$100 deposit and payment arrangement for uninsured accounts. If you are making one payment for more than one patient’s account, it is your responsibility to include the account number for each member you are paying on, along with the dollar amount you want paid on each account. Please understand that we post payments to the oldest owing patient encounter first.

Non-Sufficient Funds/Returned checks:

There is a fee (currently \$20.00) for any check returned by the bank.