

VICTORY PHYSICIANS

Understanding Your Financial Obligations

Your Medical Insurance policy is an agreement between you and your Insurance Company. Every insurance policy is different. Please make sure you understand your policy before you see the Doctor. It is ultimately your responsibility to ensure you have the authorization to see the Doctor and to understand what will and will not be covered by your policy.

Common Insurance Terms:

The **Guarantor** is the person legally responsible for payment of any incurred charges. You are the guarantor, **not** the insurance company.

Covered Expenses

Most health insurance plans, whether they are fee-for-service, HMOs, or PPOs, do not pay for all services. Some may not pay for prescription drugs. Others may not pay for mental healthcare. Covered expenses are those medical procedures the insurer agrees to pay for. They are listed in the health insurance policy. Please be sure and review your policy before you agree to service from the provider.

Exclusions

These are specific conditions, circumstances, or procedures for which the policy will not provide benefits. In some cases, you are responsible for these types of charges and will be billed for them.

Co-Payment

Another way of sharing medical costs. You pay a flat fee every time you receive a medical service. Some policies charge both co-pay and co-insurance. Co-pays are collected at the time of service.

Co-Insurance

The amount you are required to pay for medical care in a fee-for-service plan after you have met your deductible. The co-insurance rate is usually expressed as a percentage. For example, if the health insurance company pays 80% of the claim, you pay 20%. Co-insurance is billed to you after insurance has paid their share.

Deductible

An amount of money you must pay each year to cover your medical expenses before your health insurance policy starts paying.

What is considered Medical Debt

This is an excerpt from Fair-Debt-Collection.com...

Medical bills fall under the Fair Debt Collection Practices Act because medical debt meets the definition of a "debt" under rule 803(5):

This rule defines "debt" as, "a consumer's obligation to pay money arising out of a transaction in which the money, property, insurance, or services are primarily for personal, family or household purposes".

The rule goes on to state the term "debt" also includes overdue obligations such as medical bills that were originally payable in full within a certain time period (e.g. 30 days).

Medical Insurance:

Two common mistakes:

1. Thinking that your insurance company is responsible for paying your medical bills.
2. Thinking medical providers are required to bill your insurance company.

The truth is, consumers are responsible for their own medical debts. This means consumers must ensure their insurance company is billed in a timely manner and billed correctly. It also means they must follow up in a timely manner to ensure the medical bill gets paid.

As a convenience for you, most medical providers will offer to bill your insurance company.

Accepting their offer does not relieve you of the responsibility of ensuring the medical bill gets paid.

In some cases, your insurance company may reject the bill or flat out refuse to pay. If this happens, the medical provider will expect you to pay the bill. You are legally expected to pay the bill in a timely manner. The fact that your insurance company did not pay is not the medical provider's concern!

You may have to argue with your insurance company or go through dispute resolution but, **the medical provider is entitled to timely payment. You may have to pay the provider yourself and then work with your insurance company to get reimbursed.**

My signature below confirms that I have read "Understanding Your Financial Obligations" and understand that I am responsible for any charges incurred while under the care of Frank Arian, M.D. a California Professional Corporation dba Victory Physicians.

Patient or

Guardian Signature:

Date: