

The Dermatology and Skin Cancer Institute

Office Policies (rev 07/10/2025)

Thank you for choosing The Dermatology and Skin Cancer Institute. We are committed to providing you with the best possible care. To ensure your visit and the billing process go as smoothly as possible it is important that you understand our office policies.

Dermatology and Skin Cancer Institute Office Financial Policy

All patients are required to complete our patient information registration. ***At each visit, please let us know if there are any changes to your address, phone, driver's license, and/or insurance information. It is your responsibility to alert our staff should your coverage change from your last visit or be discontinued. If we do not participate with your insurance, you will be billed at self-pay rates.*** If you cannot provide current health insurance information you will be responsible for payment in full at the time of the visit. As a courtesy, insurance claim forms will be prepared and sent to your insurance company on your behalf. Be advised that the contract between you and your insurance company is a separate contract from that between you and our clinic.

If you are uncertain if a procedure is covered, please contact your carrier prior to your appointment to find out. As hard as we try, it is impossible for us to know every detail and nuance about each insurance company, about each insurance plan's coverage, benefits, and/or eligibility, and about the changes in coverage the insurance companies make daily. For example, recently, some insurance companies have denied payment for diagnoses of hair loss and nail disorders. As such, we apologize, but we are not able to waive charges that your insurance company does not cover or payments that they retract later. ***It is your responsibility to be knowledgeable about your specific insurance coverage/benefits/eligibility. DSCI does not provide services for Medicaid patients.***

Co-pays and deductibles are required at the time of each visit prior to being seen. Some HMOs require referrals. You are responsible for obtaining your own referral prior to your appointment with us. We can retrieve electronic referrals, but if your insurance requires a paper referral, you are responsible for picking the referral up from your doctor and bringing it with you to your appointment. ***If you are seen in the office without a referral, you will be billed at self-pay rates which you will be responsible for in full. For any reason, if your insurance company does not pay for your visit or if your insurance company retracts the payment at any time, you will be responsible for payment in full.***

Co-pays, deductibles, and outstanding balances will be collected PRIOR to each visit to our office. If a deductible is applicable, you will be responsible to PRE-PAY a minimum of \$100 for a general dermatology visit and up to \$2,000 for a surgery visit.

Credit Card Surcharge Fee

In the setting of decreasing insurance reimbursements despite increased costs in every aspect of running our medical practice, we are forced to implement a non-refundable credit card surcharge fee of 3% to offset processing fees. We apologize for this necessity. There is no surcharge fee if you choose to use a debit card, but our office still gets charged processing fees, so we would prefer payment by cash or check to avoid this fee. If you have paid by credit card and any refund is due, it will be by check minus the 3% surcharge which are the fees charged by the credit card company. Please note **personal checks that are returned for non-sufficient funds will incur an administrative fee of \$50.** As part of the Fair Credit Billing Act, patients of the practice agree to not submit dispute charge requests with their credit card company or banking facility without making a good-faith effort to resolve a problem with the practice. Any dispute filed with your credit card company will incur a \$50 administrative fee.

Credit Card on File

Just as you leave many bills on auto-pay, we request all our patients provide a valid credit card to be stored by our credit card processor under secure (SSL) protocol; **we require this for High-Deductible Insurance Plan and Surgery Patients.** Once your insurance company has paid their portion of your covered charges, if there is a balance due less than \$200, we will charge your credit card on file. If the balance is more than \$200, we will email you a statement. If we do not receive payment in 14 days, we will charge your credit card on file for any remaining deductible, co-insurance, additional co-pay, and/or any non-covered charges. A receipt of any payment will be emailed to you. You can cancel the authorization at any time by contacting us. This authorization will remain in effect until cancelled.

If you opt-out of having a credit card on file and there is a balance due after your insurance adjudicates your claim, you will be sent a statement which will include a \$2 administrative and postage fee.

Please be aware that any balance on your account is your responsibility. If you do not have insurance or your insurance does not cover the services rendered, payment is expected in full at the time of service, **prior** to any procedure. If this is a financial hardship, payment arrangements can be made.

Appointment Cancellation / "No-Show" Policy

We kindly request at least 48 hours' notice when cancelling or rescheduling your general dermatology appointment and at least 72 hours' notice for surgery appointments. Appointment availability is limited at times, and a no-show for your appointment takes away from a patient needing to see us. Our no-show fee is \$75 for ANY missed General Dermatology appointment for any reason, and \$150 fee for ANY Surgical missed appointment.

Medication Refill Requests

Refills may be called in during regular office hours. Please have the following information available when you call: patient's name, date of birth, phone number, name of medication, strength and dosage, and the pharmacy you want it called in to. Please make sure we have your complete pharmacy information including name, address and telephone number. ***Please allow 72 business hours for medication to be called in to your pharmacy. DSCI does not refill prescriptions after business hours, weekends, or on holidays.***

- Plan ahead: You should contact our office three (3) days before your medication is due to run out. However, if you are using a mail order company; please contact us fourteen (14) days before your medication is due to run out.
- Be patient: some medications require prior authorizations. The extra paperwork required from your insurance company may take days to process and may delay your needed medication. Please anticipate a 7-to-10-day approval process.
- Any refill request will require a review of your medical records, etc. Certain medications require mandatory laboratory testing before they can be refilled. If you do not have up-to-date laboratory testing, this may delay your request until the appropriate testing is completed.
- We will not refill any medications that were prescribed by other physicians. Refills on medications will only be authorized for medications prescribed by our providers in our office.
- **Please keep your follow-up appointments. It is our office policy not to authorize refills if you have missed your appointments or fail to keep your scheduled recommended visits.**

Policy for oral, certain topical, injectable, or monitored medications: **A follow-up visit will be required at least every 3-6 months to verify medication efficacy.** Policy for other topical medications: **A follow-up visit will be required at minimum every 12 months to verify medication efficacy.**

Biopsy Results: If you had a biopsy during your appointment with us, and you do not hear from us within two weeks, please call the office 215.361.3376 and press Option 5.

Depending on your insurance, you may receive bills from outside laboratory companies (i.e. Quest laboratory, pathology companies, etc...). If you receive a bill from an outside company, please call that company's phone number and speak to their representative regarding the matter if you have any questions.

All sales are final. We do not offer refunds or exchanges for products or services. Recommendation and performance of any cosmetic treatments or procedures is at the sole experienced discretion of our medical staff. If at any time after your treatment, you feel you are having an adverse reaction or side effect, please call the office to discuss. If you need to visit the office to see a dermatology provider, your insurance will be processed for billing and/or tests if needed, or you will incur self-pay fees if you do not have insurance.

I have had an opportunity to read the office's Notice of Privacy Practices. I acknowledge that a copy of the current notice will be posted in the reception area, and that I will be offered a copy of any amended Notice at each appointment. I am aware that copies of this document available upon request or can be downloaded from our website: www.361derm.com

We kindly request that our patients direct any concerns or constructive feedback to the attention of our office manager via phone or email patientservices@361derm.com. We make every effort to ensure the finest delivery of care and customer service.

We appreciate positive reviews online on Google!

FINANCIAL and OTHER OFFICE POLICIES - SUMMARY STATEMENT FOR SIGNATURE

- I have read and understand the DSCI Office Policies above and agree to be bound by its terms.
- I understand I will be charged a \$50 non-refundable admin fee if I no-show or cancel with less than 48 hours' notice for a general dermatology appointment, or a \$150 non-refundable admin fee if no-show or cancel with less than 72 hours' notice for a surgery appointment.
- I understand that accounts with unpaid balances after 60 days may be forwarded to a collection agency or District Court.
- I accept responsibility for any co-pay due. I understand the co-pay is NOT-REFUNDABLE once I have been evaluated by a provider.
- I accept responsibility for any deductibles, co-insurance amounts, and the full cost of non-covered services.
- I understand if my insurance company does not pay for any or all of my visit, or if my insurance company retracts the payment at any time, I will be responsible for payment in full.
- I consent to have my medical records sent to insurance companies or financial institutions to prove that services were rendered.
- Co-pays, deductibles, and outstanding balances will be collected PRIOR to each visit to our office. If a deductible is applicable, I will be responsible to PRE-PAY a minimum of \$100 for a general dermatology visit and up to \$2,000 for a surgery visit.

Authorization to Pay / Authorization to release medical records: I request that payment of authorized Medicare and/or Insurance benefits be paid directly to Dermatology & Cosmetic Surgery Institute, PC. I permit a copy of this authorization to be used in place of the original. I authorize the release to the Social Security Administration, Centers for Medicare and Medicaid Services or its intermediaries, or to my medical insurance carriers any information regarding this or related claims. Additionally, if I have "Medigap" / Secondary Insurance coverage, I request benefits be paid on my behalf for any services furnished. I authorize the Dermatology and Skin Cancer Institute to release to my "Medigap" carrier information needed to determine my benefits.

Signature of patient or responsible party

Printed name if other than patient

Date

DSCI - Important Information to understand regarding Insurance Policies (rev 03/01/2023)

What is a referral?

A referral is an important process in your medical care. When you join an HMO, the primary care physician (PCP) you select will coordinate ("refer") your care to a specialist (Dermatologist) to ensure you get the most appropriate care. Your insurance carrier mandates that you get this referral from your PCP. Please contact your PCP within three (3) business days of your appointment in our office to determine if they issued you the referral. Without a referral, we will have to reschedule the appointment.

What is a co-pay and co-insurance?

A **co-pay** is the amount you have to pay to access medical care according to your insurance contract. In some cases, it might be \$10-\$80 but with some insurances, it would be a percentage of your bill (10-20% is common). **Once you have been evaluated by a provider in the practice, your co-pay is NOT REFUNDABLE.** **Co-insurance** is the remaining balance after the insurance company has paid their portion. With the new Medicare products being offered by commercial insurance companies, some Medicare patients do have a co-pay as well as their co-insurance to pay.

What is a deductible?

A deductible is the amount of money that a patient must pay out of pocket before the insurance company is responsible for any charges. The average deductible ranges from \$100 to \$3000 and once this is met by patient the insurance company will begin to pay for covered charges. **There is no way for us to know how much your deductible is since there are so many different insurance plans in existence.** Every medical service in this office will generate a charge, so if you are concerned that you will have to pay out of pocket, please contact your insurance company prior to having the procedure done. Medicare patients are responsible for their deductible at the beginning of each year.

Why do I have to pay my co-pay and/or deductible?

When you sign up with an insurance carrier, you sign a contract which stipulates that you are obligated under the conditions of that contract to pay your co-pay, co-insurance, and/or deductibles. This means you are required to pay a co-pay, co-insurance, and/or deductible for all office visits, including follow-up examinations and outpatient surgical procedures done in our office. If you do not meet this obligation, your insurance company has the right to deny the charges which would leave you responsible for the entire cost of the services rendered during your visit.

Please note: Depending on your insurance, you may receive bills from outside laboratory companies (i.e. Quest laboratory, pathology companies, etc...). If you receive a bill from an outside company, please call that company's phone number and speak to their representative regarding the matter if you have any questions.

Why can't you just "write off" my co-pay and/or deductible?

Since your insurance contract stipulates that you must pay a co-pay and/or deductible, waiving this fee would violate your contract. When we signed up with your insurance company our contract states we will collect co-pays and/or deductibles owed by the patient. If the doctor gives you a "discount" by waiving your co-pay and/or deductible and then bills the insurance company without giving them the same "discount", it is considered insurance fraud.

Why do you collect the co-pay instead of billing me like my last doctor?

It is much more efficient to collect the co-pay at the time of service. Otherwise, it becomes more difficult and expensive to deal with administratively. This policy is non-negotiable.