

## **Carlsbad-Encinitas Podiatry Financial Policy**

Thank you for choosing us as your health care provider. Dr. Lieberman is a contracted preferred provider with most insurance plans. Please call our office to verify our participation status. Please understand that payment of your bill is considered a part of your treatment. The following is a statement of our Financial Policy.

If you have an indemnity insurance plan, PPO, or EPO with a carrier with whom we are contracted to provide services, such as Blue Cross, we will bill your carrier for services rendered. Please be prepared to pay your co-payment at the time of your appointment. You will be responsible for any coinsurance and deductible amounts after we have received an explanation of benefits from your carrier. Payment for non-covered services and medical supplies will be the patients responsibility and will be paid in full at the time of the visit.

Medicare assignment is accepted. Medicare patients are required to meet their calendar year deductible. If there is no supplemental insurance the patient will be responsible for the 20% co-payment. If you have supplemental or secondary insurance please tell us at the time of the visit.

Patients who do not have medical insurance will be required to pay for services rendered in full on the date of service unless other arrangements have been made. We accept payment in the form of cash/money order, bank check, Visa or MasterCard.

Missed appointments: Unless canceled, at least 24 hours in advance, our policy is to charge for missed appointments at the rate of \$45.00. Please help us serve you better by keeping scheduled appointments.

Thank you for understanding our Financial Policy. Please let us know if you have any questions or concerns. I have read, understood, and agree to this Financial Policy.

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Signature of patient of Responsible Party

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Date