

Valley View Family Practice Associates

213 Route 245
Rushville, NY 14544
4638 State Route 245
Gorham, NY 14464
198 Parrish Street
Canandaigua, NY 14424



Financial Policy

EFFECTIVE JANUARY 1, 2017
[Reviewed & Updated May 23, 2019](#)

Geoffrey P. Ostrander, M.D.
Robert J. Ostrander, M.D.
Donna J. Schue, M.D.
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In the last few years, health care has experienced significant changes, specifically due to the Affordable Care Act signed into law in March, 2010. Physicians are now seeing more individuals with High Deductible Health Plans (HDHP), which places more financial responsibility on the patient. Due to the changes in health care, it is necessary to update our financial policy.

1. There will be a **\$25.00 charge for all missed (no-show) or cancelled appointments with less than 24 hours notice. \$75.00 charge for 2nd missed appointment.** Fees must be paid before you will be seen for any routine visits.
2. **Co-payments are due at the time of service.** Any co-payments not paid on the date of the visit will be charged a \$10.00 fee.
3. **Self-pay patients must pay at the time of service.** Payments not received on the same day will be charged a \$10.00 fee.
4. **Please note VVFP cannot give any estimates for medical services prior to being seen.** This includes the cost of the level of the visit. We can only provide an **estimated range of an anticipated charges** from the lowest to the highest level. **Again, this cost is an estimate. We cannot determine charges prior to being seen.**
5. **NOTICE OF NON-COVERAGE FOR MEDICAL SERVICES** – Valley View Family Practice will always bill your health insurance company for medical services. You are responsible for deductibles, co-payments, co-insurance amounts or any **NON-COVERED MEDICAL SERVICES. It is the patient's responsibility to know and understand their health care benefits and coverage limits.** In the event such medical services are not covered under your health insurance plan, this notice serves to inform you that your account will be billed.
6. **Medications and medical supplies must be paid for when received.**
7. For patients with **Health Plans with Deductibles, the fee collected at the time of service is based upon the level of service you receive, and this payment amount will be applied towards your account.** You will be billed for any balance due after your insurance has processed the claim (see reverse side of this notice for more explanation on High Deductible Health Plans). **If you do not pay at the time of service, a standard payment plan will be set up.**

Standard Payment Plans – Per Family*		*If your account is placed on a Standard Payment Plan, your payment must be received monthly to remain current. We use an automated telephone service to make reminder calls on past due bills.
Balances 0 to \$100.00	\$20.00 per month until paid	
Balances \$100.00 to \$300.00	\$50.00 per month until paid	
Balances \$300.00 and up	\$75.00 per month until paid	

Patient balances carried beyond 30 days will be charged 1.5% per monthly fee. This includes accounts on payment plans.

8. **Past Due Accounts** - For all **patient and family balances** (multiple patients from one family) **over \$100.00**, no routine visits can be scheduled until the balance is paid in full.
9. **Severely past due accounts will be turned over to collections.** In the event your account is placed into collections, a 30% fee will be added to your balance to cover the collection agency fee. Severely past due accounts can result in being released from the practice.

Valley View Family Practice accepts all major credit cards (Visa, Master Card, Discover and American Express). **You may also pay your bill on-line at valleyviewfamilypractice.com.** If you are experiencing financial difficulty, payment options are available. Please contact our **Billing Specialist, Kim Maslyn, at (585) 554-5361** to set up a payment plan. If you have any questions, please ask the medical secretary, or you may contact one of the individuals listed below.

Kim Maslyn, Billing Specialist (585) 554-5361

Sabrina McClow, Practice Manager (585) 554-6069

I have read or received a copy of this policy.

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This Financial Policy Addendum applies to Patients with Medicaid or Medicaid Advantage Policies ONLY: (ADDENDUM – 07/28/2017)

10. Since Medicaid patients cannot be charged fees for **NO SHOW** appointments, or for **appointments canceled with less than 24-Hours' Notice**, the following policy applies:

1. **FIRST** appointment NO SHOWED or CANCELED with less than 24-Hour Notice, within a 12 month period (NOT calendar year), the patient will be sent first Missed Appointment Notification Letter.
2. **SECOND** appointment NO SHOWED or CANCELED with less than 24-Hour Notice, within a 12 month period (NOT calendar year), the patient will be sent second Missed Appointment Notification Letter which specifically states: ***Any further missed appointments could result in discharge from the practice.***
3. **THIRD** appointment NO SHOWED or CANCELED with less than 24-Hour Notice, within a 12 month period (NOT calendar year), **the patient could be dismissed from the practice with authorization from the Primary Care Physician.**

If you have any questions, please ask the medical secretary, or you may contact one of the individuals listed below.

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High-Deductible Health Plan (HDHP)

Many different health insurance companies (MVP, Excellus, AETNA, etc.) offer high deductible health plans. A **high-deductible health plan (HDHP)** is a health insurance plan with lower premiums and higher deductibles than a traditional health plan.

A deductible is the **annual dollar amount you must pay out of pocket (for expenses) before your insurance company begins to pay for any services.** Most high deductible health plans require amounts into the thousands, which means you may have to pay out of pocket for most of your primary care services.

The **deductible resets annually** depending on your plan year. Typically this is either January 1st or July 1st.

All amounts paid by you will be applied to your deductible through the same insurance and filing process used on typical policies. You will receive an Explanation of Benefits (EOB) from your insurance company letting you know your paid amount has been applied to your deductible.

For balances carried beyond 30 days, a 1.5% monthly fee will be charged to your account. Payment options are available.

Please contact our **Billing Specialist, Kim Maslyn at (585) 554-5361, ext. 4** to set up a payment plan.