Lakeside Allergy Asthma and Immunology, LLC

**Financial Policy**

In order to accommodate the needs and requests of as many patients as possible, Lakeside Allergy Asthma & Immunology is contracted with numerous insurance companies. While we are pleased to be able to provide this service to you, it is not possible for our staff to keep track of all the individual requirements of each plan. Every plan has different stipulations regarding access to care and payment for services received. Within the same insurance company, benefits may differ depending upon what type of contract your employer negotiated with that carrier on your behalf.

Providing quality medical care for our patients is our primary concern. We are happy to provide care for our patients, within their insurance contract guidelines, but we ask that our patients come prepared at the time of service to let us know what those guidelines are. In most of our contracts, Lakeside Allergy Asthma & Immunology personnel are not permitted to interpret insurance benefits for the patient. We are expected and obligated to provide quality care to each insured person, but it is the insured person's responsibility to understand their benefits.

Should your insurance company require a specialist referral from your primary care physician before you can be seen by our physicians, it is your responsibility to obtain that referral prior to your appointment. You should bring the referral with you to your appointment. Our contracts with the insurance companies prohibits us from seeing you without a referral and billing them for the services. If you are seen without a referral, you must be prepared to pay for all services in full at the time they are rendered. If a referral is required and you are unsure as to how to obtain one, please let the staff know and we will be happy to provide assistance.

If you do not inform us of any special requirements in your insurance contract, such as referrals or pre-authorization for treatment, and we subsequently order services that are not covered, we will have no choice but to bill you directly for those charges. In the event that services are provided and your insurance coverage is not in effect on that day, or if your contract contains a pre-existing clause, your insurance carrier will probably deny payment for services received. Please remember that you, the patient, are ultimately responsible for payment on your account.

With your cooperation and help, you should be able to receive all of the insurance benefits offered to you, and we will be able to concentrate on caring for your medical needs.

**I HAVE READ AND UNDERSTAND THE OFFICE POLICY STATED ABOVE AND AGREE TO ACCEPT FINANCIAL RESPONSIBILITY AS DESCRIBED.**

**Patient and/or Insured Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_