



PAYMENT POLICIES

All patients, parents or guardians must complete and sign our Patient Information and Financial Policy forms before seeing the provider.

Patients With No Insurance - Payment is expected at time of service unless prior arrangement has been made.

- We accept cash, checks and Visa/MasterCard
- We offer a payment plan with prior business office approval
- We offer a 20% discount for payment in full at time of service. This is due to a reduction in administrative costs associated with billing for services.

Regarding Insurance - Charges for services are ultimately the responsibility of the patient, whether your insurance company pays or not. We file insurance claims as a courtesy to you. We need your help to accomplish this goal by providing complete and accurate insurance information. Knowledge of your deductible, co-pays, and coverage limitations is your responsibility. Your insurance policy is a contract between you and your insurance company. If for any reason your insurance coverage changes, it is your responsibility to inform Advanced Pain Centers of Alaska in a timely manner. If you fail to inform us within 60 days of the change, Advanced Pain Centers will not be responsible for filing your insurance.

- We collect payment for deductible amounts, co-pay/coinsurance and any non-covered services at the time of service.
- You will be billed for any additional amounts remaining after your insurance has paid.

Procedure Deposits – We collect a minimum of a \$250.00 deposit from insured patients at the time of your procedure. This is to help cover your coinsurance or any non-covered charges. Once insurance has paid, any credit balance remaining on your account is refundable. If you do not have insurance, you will be expected to pay for the entire cost of the procedure unless previous arrangements have been made with our billing office.

Usual and Customary Rates – While our fees are based on a national geographic standard, please be aware that some non-contracted insurance companies may reduce or deny benefits based on what they consider as UCR (usual, customary, or reasonable). You are responsible for payment regardless of your insurance company's determination of usual and customary rates.

Statements – We print statements each month. Statements show all outstanding balances and indicate if insurance has been filed. Please pay any balance owed in a timely manner and follow up with your insurance company to make sure they pay on your claims. For your convenience, you may call our billing office and pay over the phone at 907-278-2741 or 877-278-2741.

Anchorage
1917 Abbott Road, Suite 100
Anchorage, AK 99507
(907) 278-2741 telephone
(907) 743-8284 facsimile

Delinquent Accounts – Numerous efforts will be made to contact you and resolve balances due on your account. Once we have exhausted our internal efforts to obtain payment for service, we will, as a last resort, refer accounts to an outside collection agency. These agencies report delinquent accounts to credit reporting services. You will also be charged for the fees that we incur trying to collect on your account.

Returned Checks – Occasionally a check written to us will be returned as unpaid. When this happens, a fee of \$25.00 will be charged to your account.

Patient Refunds – Overpayments on your account are refundable under the following circumstances: you have not have been seen in the office for 90 days, there are no outstanding insurance claims on your account, and there are no outstanding balances due on your account. Refunds are processed bi-weekly. If you are due a refund and have not received payment, please call and speak with our billing department.

Minor Patients – The adult accompanying the minor (parent or legal guardian) who signs the financial policy is responsible for payment on the account.

Anchorage
1917 Abbott Road, Suite 100
Anchorage, AK 99507
(907) 278-2741 telephone
(907) 743-8284 facsimile