



## FINANCIAL POLICY

Welcome to Payne and Holloway!

We are pleased to have your child as our patient. Payne and Holloway is committed to providing quality, accessible, and cost effective health care services to our patients and we strive to make every visit a caring experience. This information was designed to provide our families with an explanation of our financial policy.

It is the policy of Payne and Holloway that payment is due at the time of service unless other arrangements are made in advance. We require all patients to pay their copay at the beginning of their visit.

If you are covered by health insurance we be will be happy to bill your insurance company. Please provide your insurance information to the front office staff and we will verify your coverage. We are currently participating in Blue Cross, Medicaid and Tricare Insurance companies. If your insurance is not one that we are currently participating in, you are responsible for payment in full. As a courtesy, we will bill your insurance company for you and if not paid within 30 days you will be responsible.

We accept debit cards, credit cards, check or cash as methods of payment. All returned checks are subject to a \$35.00 service charge plus the amount of the check payable by credit card, debit card or cash.

Thank you for understanding our financial policy. Please let us know if you have any questions.

Printed Name of Patient (Parent/Guardian, if minor): \_\_\_\_\_

Signature of Patient (Parent/Guardian, if minor): \_\_\_\_\_

Date Signed: \_\_\_\_\_