# BLUE RIDGE BEHAVORIAL HEALTH: FINANCIAL AGREEMENT

## **INSURANCES:**

Please check with our Billing Department to see if we participate with your insurance company. It is your responsibility to verify that we have your current address, phone number and insurance information on file.

If we participate with your insurance company, we will submit all services performed in our office for reimbursement – unless we have received prior notification of non-covered services. All copays, deductibles, and overdue balances are your responsibility, and payment is expected at the time of each visit.

If we do not participate with your insurance company, you are responsible for payment in full at the time services are rendered. We will provide you with a Reimbursement Information Sheet to assist in filing your claim with your insurance company.

Insurance companies often require pre-authorization as a condition of reimbursement – whether or not we participate with them. It is your responsibility to obtain any required insurance referrals or authorizations prior to your visit. If a required referral is <u>not</u> presented at the time of your visit, you may be required to reschedule your appointment.

## PAYMENT FOR SERVICES

Payment for each visit is expected at the time of service. For your convenience, we accept Visa, MasterCard, Discover, cash, check, or money order. Returned checks will incur a \$25 fee to each patient account affected. All patient payments including any outstanding balances are due at the time of service – unless prior arrangements have been made with the Office Manager, Billing Coordinator, and/or your clinician.

You will be charged for missed appointments if you fail to provide 24 business hours notice. You are fully responsible for these charges because they are not covered by your insurance.

Overdue accounts may incur late fees at 18% per annum. All balances that become 90 days past due may be sent to a professional collection agency. Should your account be sent to a collection agency, you will be financially responsible for a collection fee equal to 33% of the amount sent to the agency and any additional legal fees that our office incurs through the process utilized to collect the outstanding delinquent balance. Your signature below authorizes Blue Ridge Behavorial Health to release information necessary for collection of past due accounts. Payment in full of any past due balance is expected prior to being seen in our office in the future. In addition, payment in full will be expected at the time of service for any future services.

## INSURANCE AUTHORIZATION AND ASSIGNMENT OF BENEFITS/CONSENT TO TREATMENT

I UNDERSTAND THAT CERTAIN INFORMATION MAY BE REQUIRED BY THIRD PARTY SOURCES FOR THE PURPOSE OF TREATMENT, PAYMENT (INCLUDING COLLECTIONS OF PAST DUE ACCOUNTS) AND HEALTH CARE OPERATIONS. I HEREBY CONSENT TO BLUE RIDGE BEHAVIORAL HEALTH RELEASING MY HEALTH INFORMATION FOR THE PURPOSES OF TREATMENT, PAYMENT, AND HEALTHCARE OPERATIONS. I HEREBY ASSIGN TO THE PRACTICE ALL BENEFITS/PAYMENTS FOR SERVICES RENDERED TO MY DEPENDENTS AND/OR MYSELF. I UNDERSTAND THAT I AM RESPONSIBLE FOR ALL AMOUNTS NOT COVERED BY MY INSURANCE. MY SIGNATURE BELOW ACKNOWLEDGES THAT I HAVE BEEN PROVIDED BLUE RIDGE BEHAVIORAL HEALTH'S NOTICE OF PRIVACY PRACTICES.

Printed Name of Patient

Date

Signature of Party Financially Responsible/Parent/Guardian

Date

## **Office Hours**

Evening, weekend and other hours are available at the discretion of your clinician. The business office is open Monday through Friday from 8:30am until 4:30pm.

## Appointments

All appointments are scheduled. Psychiatrist's appointments are scheduled by the administrative staff. All other appointments are scheduled by your clinician. We require a minimum of 24 business hours notice if an appointment must be cancelled or rescheduled. Failure to provide 24-hour notice of cancellation may result in a charge up to the full fee of the scheduled service. Payment for missed appointment charges are the responsibility of the patient.

## Telephone Service

The office uses a voice mail system. Please listen carefully to all options. During business hours, you can direct your call to the receptionist at any time by selecting "0". If you know the extension of your clinician, you may enter it at any time. If you do not know your clinician's extension, you can press "4" for a directory. The physician line is monitored daily until 4:30 p.m. The following services can be reached directly by entering the appropriate extensions:

New patients – 1	Prescription refills – 2	Physician scheduling – 3	Billing – 6
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## Emergencies

If you have an emergency outside of normal business hours, contact our answering service at 301-712-9183. If your clinician is unavailable, the answering service will direct you to the on-call clinician. Please do not call for non-emergency problems after regular business hours.

#### **Prescription Refills**

When you need a prescription refill, please contact your pharmacist first. If no refills remain, the pharmacist will call our office to authorize a new prescription. For other pharmacy requests (mail order, Adderall, Ritalin, Concerta, Dexedrine, Metadate etc) please select extension 112. ALLOW A MINIMUM OF 48 HOURS FOR PRESCRIPTIONS TO BE PROCESSED.

#### Managed Care

Managed care plans have various rules about how to begin treatment. If your plan requires a referral from your primary care physician, we must receive the referral prior to the first visit. Some plans require phone authorization before beginning treatment. If the required referral or authorization is not presented at the first visit, you may be required to reschedule your appointment.

#### **Other Fees**

Psychiatrists charge \$275 per hour, rounded to the nearest 15 minute interval, for school or team conferences, consultations conducted by telephone, and time spent reviewing, preparing, and/or writing reports. The charge for court-related services is \$600 per hour rounded to the nearest 15 minute interval.

Psychologists charge \$145 per hour, rounded to the nearest 15 minute interval, for school or team conferences, consultations conducted by telephone, and time spent reviewing, preparing, and/or writing reports. The charge for court-related services is \$360 per hour rounded to the nearest 15 minute interval.

Social Workers charge \$130 per hour, rounded to the nearest 15 minute interval, for school or team conferences, consultations conducted by telephone, and time spent reviewing, preparing, and/or writing reports. The charge for court-related services is \$300 per hour rounded to the nearest 15 minute interval.

The minimum charge for copies of patient records is based upon the current State of Maryland guidelines. The maximum copying charge per patient chart is \$75. There is an additional fee of \$15 if the chart is archived off-site (typically older than 2 years).

These charges are not subject to insurance reimbursement and are the responsibility of the patient.

Patient received copy [ ]

Patient refused copy [ ]

Revised: January 29, 2019