

FINANCIAL POLICY

INSURANCE INFORMATION

The patient is expected to present the insurance card at each visit. Insurance claims are filed to participating insurance companies. The patient is responsible for notifying our office of any changes in insurance coverage.

NON-PARTICIPATING INSURANCE PLANS

Verification of participation with the patient's specific insurance plan is the responsibility of the patient. Patients are encouraged to contact our customer service representatives at (865)212-3618 or their insurance carrier to ensure participation with the insurance plan prior to arriving for an appointment.

WORKERS COMPENSATION

Patients covered with workers compensation must contact their employer and assigned caseworker prior to treatment. Some of our physicians do not participate with workers compensation plans. The patient must inform the office prior to the appointment if the visit is related to a work injury.

LAB PROGRAMS

Summit Medical Group does not participate in any lab card programs.

PATIENT BALANCE

All co-payments, coinsurance, and deductible amounts are due and payable at the time of service.

SELF-PAY ACCOUNTS

Payment in full is expected at the time of service for uninsured patients.

RETURNED CHECKS

Checks returned for insufficient funds are collected by CheckCare®, a third party collection agency. A \$39.00 fee will be charged by CheckCare® for each returned check. If your check is returned, it may be re-presented electronically. You authorize service charges and processing fees, as permitted by state law, to be debited from the same account by paper draft or electronically, at our option. Patients should contact CheckCare® directly regarding returned checks.

DIVORCE CASES

In cases of divorce, the individual who receives the care is responsible for payment of any patient balance at the time of service. We will not bill a divorced spouse for the patient's services. The responsibility for payment of services for minor children belongs to the guarantor. Statements will be mailed to the guarantor address. We cannot send statements to multiple addresses.

COLLECTION ACCOUNTS

Unpaid patient balances may be sent to a third party collection agency at the physician's discretion.

PATIENT REFUNDS

Refunds are issued to patients when a patient overpayment has occurred and there are no outstanding claims to insurance.

QUESTIONS/PAYMENT OPTIONS

We accept checks, money orders, Visa, MasterCard, Discover, and American Express. For specific billing inquiries or to pay by phone with a check, credit card or debit card, please call (865) 212-3618. Payments may be made online at www.summitmedical.com or mailed to Department 888073, Knoxville, TN 37995-8073

Payment Option Guide

Understanding Your Financial Responsibilities



Easy, Convenient Ways to Pay

For Billing & Payment Info:

Customer Service
(865) 212-3618
Monday-Friday
8 am—4 pm



www.summitmedical.com

Summit Medical Group

1225 E. Weisgarber Rd
Suite 200
Knoxville, TN 37909

Phone: 865-584-4747

Fax: 865-584-1363

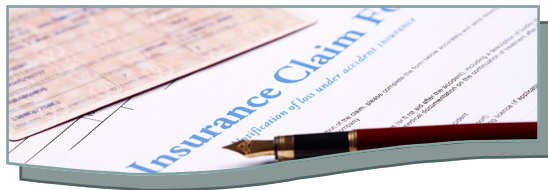
www.summitmedical.com

What if I can't pay for my visit on the day I receive the service?

Payment for healthcare services at any Summit Medical Group facility is due at the time the service is rendered in accordance with insurance contracts.

Any copay, deductible, and/or co-insurance should be paid in full during the visit.

However, Summit recognizes there will be circumstances in which it is necessary to establish a payment plan in order to fulfill the financial responsibility.



With the recent changes in healthcare reform, out-of-pocket medical expenses are on the rise with increasing deductibles and co-pays. Summit Medical Group is first and foremost a medical provider with limited capability to provide the financial resources to support extended deferred payments.

Summit values all customers and understands that patients may have unforeseen situations that prohibit full payment at the time of service. As a courtesy to you, Summit offers a payment plan option with the following terms:

<u>Balance Amount</u>	<u>Terms</u>
<u>\$51.00 to \$250.99</u>	<u>5 month maximum</u>
<u>\$251.00 and greater</u>	<u>12 month maximum</u>

Payment Plan Guidelines

In the event full payment cannot be rendered at the time of service, the terms for monthly payments are below:

1. Payments must be made via monthly auto-draft from a checking account or a debit or credit card. We are unable to offer "pay as you go" arrangements.
2. A \$25 minimum monthly auto-draft payment amount is required.
3. Payments accepted outside of a formal auto-draft payment plan agreement do not prevent future collection action.
4. There are no processing or interest fees for payments.

If these terms cannot be met, we do accept VISA, MasterCard, Discover, and American Express.

How do auto-drafts work?

- Payments are deducted monthly from a checking account or credit or debit card account in accordance with your payment plan agreement.
- You choose the day of the month for deduction.
- All credit/debit card information is securely stored with the payment processing vendor, Elavon.
- Confirmation of credit/debit card payment is emailed to you each month.

Easy, Convenient Ways to Pay

Payments may be made 24 hours a day/7 days a week:

- **Online:**
www.summitmedical.com
- **IVR System: (865) 212-3618**