

Big Apple Cardiology

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Financial Policy

Insurance

We participate with many insurance plans; however, insurance coverage is a contract between the patient and the insurance carrier. While we may assist in verifying benefits, verification of insurance benefits does not guarantee payment or coverage. Patients are responsible for understanding their coverage, including copayments, deductibles, coinsurance, and any non-covered services.

Patient Responsibility

All copayments are due at the time of service. Deductibles, coinsurance, and non-covered services remain the responsibility of the patient. Payment may be required at the time services are provided. Any balances remaining after insurance processing will be billed to the patient.

Self-Pay Services

For patients without insurance or for services not covered by insurance, payment in full may be required at the time of the visit. Self-pay pricing may be provided upon request.

Payment Method on File

To maintain an active patient account, Big Apple Cardiology may require a valid credit or debit card to be securely maintained on file. This card may be used to process authorized patient responsibility balances in accordance with the practice's Credit Card Authorization and Financial Policy.

Missed Appointment Policy

Appointments canceled with less than 24 hours' notice or missed without notification may be subject to a \$100 missed appointment fee. This policy allows us to offer appointment times to other patients in need of care. Missed appointment fees may apply to clinic visits and scheduled diagnostic testing. Repeated missed appointments may result in limitations on future scheduling. If a card is maintained on file, applicable fees may be charged to the card on file in accordance with the Credit Card Authorization.

Non-Covered Services

If a service is determined by the insurance carrier to be non-covered, the patient agrees to accept financial responsibility for the service.

Outstanding Balances

Any outstanding balances are the responsibility of the patient. Accounts with unpaid balances may be subject to additional collection procedures if not resolved within a reasonable timeframe.

Returned Payments

Returned checks or declined payments may result in additional administrative fees.

Consent Statement

By signing this form, I acknowledge that I have read and understand the Financial Policy of Big Apple Cardiology and agree to comply with the payment terms described above.

Electronic Patient Signature (captured digitally)

Timestamp Recorded Automatically