Thank you for choosing Jordan-Young Institute. We are committed to providing you with the best patient care experience possible. As part of this goal, we would like to explain our payment policies before your treatment begins so you have the chance to ask questions before any payment obligation occurs. We feel that helping you understand your payment expectations and obligations ahead of time will help us provide you with the quality of compassion and care you expect from our practice.

For your convenience, we have answered a variety of commonly asked questions about payment policies. If you do not find the answer to your specific questions, please ask to meet with appropriate staff who can help.

**DO YOU ACCEPT MY INSURANCE AS PAYMENT IN FULL?**

We are participating providers with Medicare, Cigna, Sentara Optima, Blue Cross Blue Shield and Healthkeepers, Aetna, Humana, Tricare Standard, United Healthcare, VHN, and PHCS. This means that we will accept the insurers allowable as payment in full. You, however, are still responsible for payment of any deductibles, co-insurance or co-pays as defined by your insurance coverage. Your office visit will be rescheduled if you are unable to pay your co-pay or provide a referral (if necessary) before you are seen.

We do not participate with Aetna HMO, Today’s Option Medicare Advantage or any of the Medicare-Medicaid dual-eligibility programs, however, we will assist you in determining your benefit coverage. We do not offer payment plans but we can refer you to an external agency should you need to make such arrangements.

We do not participate with Healthkeepers Plus and Sentara Family Care.

**WHEN DO I HAVE TO PAY FOR SERVICES?**

You are expected to pay all co-pays, co-insurance and unmet deductibles on the day of your visit. We accept VISA, MasterCard, Discover, and American Express as well as payment by cash or check. **If you are unable to pay, your appointment will be rescheduled.**

You are expected to pay for all non-covered services and DME Cash and Carry Items at the time of issue. We will gladly hold an item for you until you are able to pay.

**MAY I STILL BE SEEN IF JORDAN-YOUNG DOES NOT PARTICIPATE WITH MY INSURANCE?**

If you do not carry insurance we participate with, your policy may have out-of-network benefits. It is your responsibility to call your insurance carrier to determine and understand your benefit coverage. Jordan-Young will file a claim to your insurance as a courtesy to you; however, we are not obligated to accept your insurance’s payment as payment in full. **You may be balance billed for the difference between our charge and the amount your insurance pays.**

**DO I NEED A REFERRAL TO BE SEEN?**

Many insurance plans now provide open referral networks; however, **it is your responsibility to determine and understand if your individual insurance coverage requires a referral.** If your insurance requires a referral, you must have the referral available at the time of your appointment. If you do not have the referral with you, you will be asked to either 1) Reschedule your appointment to give you time to obtain the referral or 2) Sign a waiver that will make you responsible for payment in full of the charges incurred on the day’s visit.

Tricare Prime patients must obtain a referral before being scheduled for an appointment.

SIGNATURE ON BACK →
DO I HAVE TO PAY IF I HAVE BEEN INJURED IN AN ACCIDENT?

Jordan-Young does not accept legal cases or attorney liens. If you have been injured in a non-work-related accident for which you are seeking legal remedy, you will be required to pay 100% of your billed charges before being seen. **Your medical insurance cannot be billed.**

If you have been injured in a work-related accident, **it is your responsibility to obtain an award number from the state Workers’ Compensation Commission** in order to ensure that your claim will be paid in full. If you are treated without the award number from the state and your payment of your claim is denied or only paid in part by your employer, you will be held responsible for the balance of your bill.

Jordan-Young accepts fee schedule payments for injured workers covered under the United States Department of Labor, Jones Act, Longshoreman’s Act and Sentara Health Systems.

MAY I SET UP A PAYMENT PLAN?

Payment is expected in full at the time services are rendered. If you are not able to pay the patient responsible balance of your bill at the time of service, Jordan-Young retains the right to refer your account to AMC for collection. AMC will attempt to negotiate reasonable payment terms with you and will accept most forms of payment. If you fail to keep the agreed payment terms, further collection activities will ensue. You will be responsible for fees and any other associated costs incurred in collecting on your account.

Co-insurance and deductible balances after insurance are expected to be paid within 30 days of receiving your first patient statement. If your account balance is still unpaid after 31 days, **your account will be referred to Account Management Company AMC for collections. AMC is not a collection agency, but rather an external bill paying service. However, if you default on your payment arrangements or do not pay your outstanding bill, your outstanding account will be immediately transferred to a collection agency. You will be responsible for the balance due on your account plus any non-negotiable fee assigned by the collection agency in satisfying the payment of your account balance.**

You will be responsible for contacting Credit Control Corporation and AMC at either (757)873-3332 or 1-(800)723-5431 for making time-based payment arrangements or collections payments.

WHAT HAPPENS IF I MISS AN APPOINTMENT OR HAVE A CHECK RETURNED?

Jordan-Young reserves the right to charge a NO SHOW fee of $50 for any missed appointment. This fee must be paid before another appointment is scheduled.

Jordan-Young reserves the right to charge a RETURN CHECK fee of $35 for any payment by check that is returned for insufficient funds.

I have read and fully understand the policies of this office regarding payment. I agree to pay any known patient responsible obligations at the time of service or any obligations identified as my responsibility within 30 days of notification by my insurance or Jordan-Young. I understand that collection of my patient responsible balances outside these terms may be handled by an outside collection agency and I will be responsible for both the balance of the bill and any non-negotiable fees assigned for collection. I understand that I am personally responsible for following the regulations, policies and procedures of my insurance plan.

_________________________________________  _______________________
Patient Signature                                      Date

__________________________
Printed Name