

**Billing Policies for Drs. Record, Record and Associates**

**\*\*Payment in full at time of service.**

**\*\*We are vision providers for the following: Anthem Covacare (State of Virginia employees), (VSP)-Vision service plan, and Eye Benefits (UVA employees), we also offer discounts to all State Farm Employees. We are not providers for any other companies, therefore you will be required to pay for your visit in full and you will be required to file your insurance directly for re-imbusement.**

**\*\*We are medical providers for the following: Medicare, Anthem, Southern Health and Cigna only. If you have any other insurance you will be required to pay for your visit in full and you will be required to file your claim directly to your insurance for re-imbusement.**

**\*\*We charge for late cancellations (require 24 hour notification) and missed appointments.**

**\*\*We will file your claims to your insurance carriers that we are providers for, however if we receive a denial for services rendered, you will be expected to pay your balance due immediately.**

**\*\*If we receive a returned check from your financial institution for any reason, there will be a \$35.00 returned check fee added on your total balance due, it is expected to be paid immediately.**

**\*\*A ~~1.5%~~ <sup>2.0%</sup> Finance charge will be added monthly to all balances over 30 days old.**

**\*\*We will send accounts that are over 90 days old to our outside Collection Agency, Accelerated Recovery Systems. You will be responsible for all collections costs, attorney's fees and court costs.**

**\*\* I have read and understand these policies.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guarantor's name:** \_\_\_\_\_

**Relationship to Patient:** \_\_\_\_\_