



**PATIENT FINANCIAL RESPONSIBILITIES**

Stephen Lober Plastic Surgery, P.C. will provide medical services and in turn patients will be held liable for that portion of the cost of medical care for which they are responsible. Stephen Lober Plastic Surgery, P.C. will make every effort to work with patients to resolve their financial obligations to this facility.

**Medicare**

Stephen Lober Plastic Surgery, P.C. is a provider for Medicare. The patient is responsible for payment of co-payments and deductibles of covered services and the full amount of non-covered services.

**Medicaid**

Stephen Lober Plastic Surgery, P.C. is a provider for Medicaid, Georgia Better Healthcare, PeachCare, PeachState, Wellcare & Amerigroup. A referral must be obtained from the patient’s primary care physician that is listed on the card prior to the initial office visit.

**Insurance/Third party Payors**

Stephen Lober Plastic Surgery, P.C. will assist its patients in making every effort to collect payments from the patient’s or guarantor’s insurance company through courtesy filing of insurance claims and other required documentation. Since most carriers have time limits for filing correct information, it is imperative that we receive complete and correct insurance information. Though assistance will be provided, it is the patient’s responsibility to make sure his/her insurance carrier pays his/her claim. Patients or their guarantors are responsible for payment in full to their financial obligations whether or not their insurer makes payment.

**Tertiary Insurance Payors**

Stephen Lober Plastic Surgery, P.C. will not file tertiary insurance claims. Our office will be glad to provide the information needed for the patient to file a claim to these carriers.

**Self Pay**

Payment for elective procedures is due in full at Pre-Op, prior to the procedure. Payment is due the day of office procedures not requiring a Pre-Op.

**Obligations Due After Third Party Payment**

Patients who have an account balance due are responsible for payment of their account in full within 30 days. Failure to satisfy a patient’s financial obligations may require Stephen Lober Plastic Surgery, P.C. to transfer your account to a collection agency and may impact your credit rating.

**Acknowledgement**

I have read this above statement of Patient Financial Responsibilities and understand I am responsible to the limits of the law to satisfy my financial obligations to Stephen Lober Plastic Surgery PC.

Patient’s Signature \_\_\_\_\_ / /

Charges for services provided by Anesthetist, Pathologist, Hospital or other healthcare professionals not employed by this facility are not part of your bill at Stephen Lober Plastic Surgery, P.C. and will be billed separately by those private practitioners.