

FAR HILLS OB/GYN, INC.

David W. Shie, M.D. John M. Shie, M.D. Caroline H. Kennebeck, M.D.

Kelly L. McCluskey, M.D., LLC Shannon N. McAfee, D.O., LLC

FINANCIAL POLICY

1. All Co-Pay/Co-insurance amounts are due at each visit or procedure.
2. Charges not covered by insurance are due at the time of service.
3. Balances remaining after insurance payment are due within 30 days.
4. All charges/balances are due within 90 days of the date of service regardless of insurance.
5. Any unpaid balance after 90 days will be charged an interest rate of 1.5% per month thereafter until paid in full.
6. We accept Cash, Check, Visa, and Mastercard.
7. There is a returned check fee of \$35.00 for any check returned without payment.

MATERNITY CARE/SURGERY

1. Insurance benefits for maternity care and surgery will be verified through your carrier. For maternity, monthly payments will be established through the months of your prenatal care so that your out-of-pocket expenses are credited two months prior to your due date.
2. For surgery, a prepay deposit may be requested depending upon your out-of-pocket expenses your insurance carrier quotes to us.

COLLECTION ACCOUNTS

1. If you allow your account to go to collection, you are notifying our office that you are terminating the Doctor/Patient relationship.
2. If you have allowed your account to be sent to collection, you will be put on a cash only basis for one year. You then will be permitted to pay your co-pay/co-insurance at the time of service thereafter once your benefits are verified.
3. If your account has been sent to Collection twice and you return to our office after clearing your collection balance, you will be on a permanent cash only basis and payment will be required at each visit.
4. Accounts are sent to Collection starting at 90 days unless payment arrangements have been arranged and approved through our billing department. You will be responsible for all collection expenses charged to our office by any agency.

I have read and understand the above financial policy and agree to the terms as stipulated by FAR HILLS OB/GYN, INC., KELLY L. McCLUSKEY, M.D., LLC, and SHANNON N. McAFEE, D.O., LLC.

Patient

Dated