



Northwest Houston Cardiology PA

13325 Hargrave Road #100
Houston, TX 77070
281-469-8007

Patient Financial Agreement

The following information is an explanation of the fee payment policies of Northwest Houston Cardiology PA.

You will find our fee structure to be fair and equitable. Our fees, in general, are reasonable and customary for similar services provided by other cardiovascular specialists in Houston and surrounding areas.

For those who have no insurance, full payment is expected at the time of service.

For those who have insurance, our office will submit the insurance forms for your claims. Insurance identification cards **MUST** be presented at the time of service for photocopying. The insurance information must be current and accurate for timely submittal. You are responsible for making sure your information is current, if non-payment is related to improperly provided information and insurance denies the claim you will be responsible for the balance of the visit or testing. All deductibles, co-pays, and coinsurances are due and payable at the time of service, services may not be rendered if balances are not paid or payment arrangements are not made in advance to your visit.

Any portion of the fee not payable to the primary or secondary insurance will be the responsibility of the patient and are subject to the usual and customary collection process.

For patients participating in Managed Care programs for which we are providers, the co-pays **MUST** be paid at the time of services are rendered. This is a mandatory requirement of all managed care plans.

A patient referred by non-profit health care facilities, full payment is due at the time of service.

We are Medicare providers; therefore, we accept 80% of the Medicare allowable with the remaining 20% being the patient's responsibility. If there is supplemental insurance to Medicare, our office will submit the claim on your behalf.

If there are proven financial hardships which would prevent you from paying your medical bill in full, special arrangements may be made by contacting the office and discussing your financial situation with our billing department. Failure to communicate with our office regarding a delinquent bill will result in a referral for collections.

For your convenience, balances, co-pays, coinsurance and deductibles may be paid via credit card, debit card, or cash. Checks are no longer accepted.

By signing this statement, you understand and agree to the financial policies continued herein.

All cancelled or rescheduled appointments require a 48 hour advanced notice or the patient may be charged a fee for the appointment.

Patient Name

Date

Witness