
BILLING POLICY

Lubna S. Guru, M.D. participates with many insurance carriers and accepts assignment from many others. Please remember ultimately you are responsible for providing sufficient billing information and determining whether our services are covered by your insurance contract.

Referrals and Co-Payments

If your insurance requires a referral, it is your responsibility to obtain a valid referral at the time of your treatment. You are always responsible for applicable co-payments and deductibles as determined by your insurance company. Co-payments and co-insurance are always expected at the time of service unless our billing department has made prior arrangement. A \$5.00 billing service charge will be added to your account if payment is not received when services are rendered. Patients who have been delinquent in co-payments will be sent on final notice and then will automatically be sent to our collection agency.

No Show Policy

To cancel an appointment, patients must notify the office 24 hours PRIOR to their appointment. Patients who fail to notify our office of their inability to keep an appointment 24 hours prior to the appointment will be billed for the appointment in the amount of \$50.00 for a regular visit. We reserve the right to discharge patients from the practice if they miss 3 or more appointments and have failed to heed previous warnings.

Other Insurance

If we do not accept your insurance, you are responsible for payments in full at the time of your visit. Our office will bill your insurance carrier on your behalf. If the insurance carrier fails to pay our office within 60 days or there is no response from the insurance company, the balance will be transferred to patient responsibility. You will receive a statement from our billing department reflecting this.

Worker's Compensation and Motor Vehicle Accidents

If Worker's Compensation or No Fault is your primary insurance, you are responsible for providing us with accurate information regarding the date of injury, WCB, and Carrier Case numbers, as well as your insurance company's name and address. If your case is denied, all outstanding balances and future services will be your responsibility unless you have a secondary insurance carrier. In order for our office to bill your private health, all information must be provided at your initial visit to insure a timely filing of your claim.

Patient's Signature

Date