

Brentwood Skin Clinic

Financial Policy

I (the patient) agree to pay for the services rendered AND agree that the payment is ultimately MY responsibility and NOT that of my insurance company. I realize that payment of co-pays, deductibles, out of pockets, co-insurance etc. will be expected at the time of services. I authorize payment for medical services to Dr. Charles Austin Mitchell III, M.D. at Brentwood Skin Clinic, PLLC. I agree to pay ALL unpaid balances, including but not stated:

1. Main balance of my invoice
2. Fees and charges
3. \$50 returned check fee
4. No Show fee of \$75

Insurance: Brentwood Skin Clinic will file an insurance claim with my PRIMARY insurance company, but they will not file claims with secondary insurance as they do not have individual contracts with those companies. BSC can provide me with an insurance claim form (IF REQUESTED) to send to my secondary provider. Any balance remaining after payment from my main operator will be at my own risk.

BSC staff will ask me to present my insurance card at each visit and verify my contact/billing information.

Payment: Brentwood Skin Clinic has numerous ways I can pay for services. They accept Cash, Credit Card, Apple Pay, Online payment via Stripe or Personal Check. Personal verification will require proper identification (valid driver's license or other photo ID). A \$50 overdraft fee will be added to any returned check. BSC will only send paper statements if I do not provide a valid email address.

Collections: Any delinquent account will be delivered to collections after THREE (3) unpaid statements. If I am handed over to a collection agency or collection attorney, the cost of collections, attorneys' fees and court costs, and any collection agency fees will be my responsibility. BSC will evaluate a collection charge of 33.33% on my balance. Once my records show payment received from the collection's agency, I understand that to be seen as a patient, Brentwood Skin Clinic will not run my insurance for future appointments, and I will be responsible for paying my visits as Self Pay.

Credit Card on File: Brentwood Skin Clinic offers the option to securely store my CC on file for any outstanding balance or unpaid fees. This is OPTIONAL. Please ask at the front desk for more information.

Non-Covered Services: I understand that some, and perhaps all, of the services I receive may not be covered by my insurance or may not be considered reasonable or necessary by Medicare or other insurers. I understand and agree to pay for any services that my insurance plan has determined is "not covered." Self-Pay, Cosmetic or any non-covered services must be paid in full at the time of services, unless other arrangements have been made directly with the office.

Refunds: The following criteria must be met prior to BSC issuing a patient refund: there are no outstanding insurance claims on my account; there are no outstanding patent balances on my account or my family's account.

Referrals: Some insurances require a referral from my primary care physician for specialty services. If this authorization is required but not provided, I will be asked to either reschedule my appointment or pay for my visit at the time of service as a self pay patient.

Deposits: I understand that for specific appointments a deposit will be required to obtain an appointment slot. For Surgery deposits, it will be in the amount of \$50 which will be applied to my total on the day of services if I do not cancel my appointment with less than a 24-hour notice or No Show (do not come to your appointment). For Aesthetic treatment appointments, a deposit to the amount of 50% of my package or treatment total is due at time of scheduling. The remaining 50% will be due before services on the day of appointment.

Cancellation/No Shows: Brentwood Skin Clinic requires at least a 24-hour notice on any cancellations or reschedule requests. After 3 cancellations in a 2-month period, I understand that I will no longer be scheduled as a patient. I also understand that BSC will provide me with a warning notification before receiving a letter of dismissal. In addition, any General Dermatology appointment- including Telehealth- that is canceled the SAME DAY or NO SHOWED will be subject to a \$75 fee to be billed to my account. This fee will need to be paid prior to making any future appointments

Regarding our Aesthetic consults, Brentwood Skin Clinic will collect a \$100 consultation fee at time of scheduling. This will be applied towards my service(s) scheduled within 3 months of consultation. If an Aesthetic Consult is canceled the SAME DAY or NO SHOWED, Brentwood Skin Clinic will retain the fee in full. If I have a full aesthetic consultation and choose NOT to purchase any services within the 3 month time frame, I understand that Brentwood Skin Clinic will also retain the \$100 consultation fee. Additionally a new consult will need to be performed prior to scheduling any services.

For any patients who purchase an aesthetic treatment package, Brentwood Skin Clinic reserves the right to retain 50% of my package deposit up to a maximum of \$500 for any/every SAME DAY CANCELLATION and NO SHOW for your FIRST treatment appointment. For any ongoing

or established Aesthetic Service appointments, I will be subject to the above \$75 same day cancellation or no show fee. For any no show aesthetic treatment appointment, Brentwood Skin Clinic reserves the right to place a hold on already scheduled aesthetic treatment appointments pending confirmation of continuing treatment.

I understand the objective of BSC is to best serve the needs of all patients.