





1919 Lathrop St • Fairbanks, AK 99701 • Ph: (907) 456-7768• Fax: (907) 456-4045 www.fairbanksent.com

FINANCIAL POLICY

We are committed to providing you with the best possible medical care; if you have special considerations, we are here to work with you. The following information is provided to avoid any misunderstanding or disagreement concerning payment for professional services. Our office accepts a variety of insurance plans. It is your responsibility to:

- **1.** Bring your insurance card to every visit.
- 2. Be prepared to pay your co-pay or deductible at each visit. Payment can be made by cash, or credit card. For medical care not covered under your insurance, payment in full is due at the time of service. **WE NO LONGER ACCEPT CHECKS.**
- 3. The Ear Nose and Throat Clinic is a preferred provider and "in-network" for Aetna and Blue Cross insurances, and not any other insurances. Our office is happy to file claims, however payment in full is expected for all services that are not covered through insurance.
- 4. If the patient is a minor (18 years or younger), the parent or guardian must sign below. The parent or guardian is responsible for any payment due at time of service, bringing the necessary referrals and insurance card.
- **5.** If you do not present your insurance card(s) at the time of service your account will be set to self-pay and you will be responsible for any charges that may arise.
- **6.** If you have any questions about your insurance, we are happy to help you. Specific coverage issues, however, should be directed to your insurance company member services department (the number is usually on the back of the insurance card).
- 7. Our practice firmly believes that a good provider/patient relationship is based upon understanding and good communication. Questions about financial arrangements should be directed to the management office.

Please sign that you have read and agree to the financial policy.	
Signature of Patient or Responsible Party	Date