Financial Policy

➢ **Payment at the time of Service:**

MIU participates with numerous insurance carriers and will process all in-network claims. If your insurance carrier requires a referral, it must be presented to us at the time of your visit. Please be sure that you have provided us with your most up to date billing address and insurance information. At the time of service, you will be responsible to cover the amount not paid by your insurance company, including copays, coinsurance, deductibles and non-covered services unless other arrangements have been made in advance with our billing department.

An additional $5.00 fee will be added to your account if your copay / coinsurance are not paid at the time of service.

➢ **Delinquent Accounts:**

An account is considered past due 30 days following the billing date, unless other arrangements have been made with our billing department. Unpaid accounts beyond 60 days are considered delinquent and will be forwarded to a collection agency. Should you incur a temporary hardship, please contact our financial specialists in our billing department to make budgetary arrangements.

➢ **Missed Appointment:**

We appreciate your help and the courtesy of a call if you are unable to keep your scheduled appointment. You will be charged a $25.00 fee for every missed office visit that is not cancelled at least 24 hours in advance and a $50.00 fee for every missed scheduled procedure that is not cancelled at least 72 hours in advance. These fees will be added to your account.

➢ **Patient Forms:**

A $25.00 fee is required for all patient forms that our physicians or nurse practitioners are asked to fill out and sign, such as: FMLA, Disability, Workers’ Compensation, Life Insurance, etc.

➢ **Returned Check Fee:**

A transaction fee of $20.00 will be added to your account for any returned check due to insufficient funds or stop payment.

➢ **Research and Development:**

MIU conducts clinical research in accordance with Federal Regulations and Good Clinical Practice guidelines. Your medical records may be reviewed by MIU Research and your urologist to determine potential eligibility for these trials. You may be contacted to discuss your interest in participating. Your urologist may be compensated by the Research Department for the time taken to discuss study participation and for required eligibility documentation. To participate in a clinical trial the research department will be required to review a separate consent with you to document your authorization. Participation is voluntary, your patient rights will not be waived and you may withdraw at any time.

Patient's Name: (print) ________________________________________________ Date: ______________

Patient's Signature: ________________________________________________ Date: ______________