610 N. California • Missoula, MT 59802

CREDIT AND BILLING POLICY

Thank you for choosing Blue Mountain Clinic for your health care needs! Please take a moment to read over our credit and billing policies.

INSURANCE PAY - We require all co-payments to be made at the time of service, and payment in full for any deductibles and services not covered by your policy. It is *your* responsibility to ensure that the Clinic has your correct insurance information and to make sure that the services provided are a benefit of your contract. If your insurance has a Preferred Provider Network, you will be responsible for verifying participation of any physician involved in your care. If you have a secondary insurance we will submit the claims for you*. For your convenience we accept cash, checks, credit cards, and We Trade.*

It is important that you understand that your contract with an insurance company is between you and them; therefore, the ultimate responsibility for payment belongs to you. Each plan is different and filing with insurance is no guarantee that services will be paid for.

PRIVATE PAY - Payment in full is due at the time of service.

****** If your medical care is due to an injury and/or an accident (i. e. Workers Compensation or Motor Vehicle Accident), please have ready the claim number, name of claim adjuster, phone number, correct billing address and date of injury.*****

We reserve the right to charge interest on any account over 60 days.

LAB POLICY - Blue Mountain Clinic is able to offer many lab tests in house. There is no assurance that lab work will be covered by your insurance. Certain tests (such as pap tests, pathology, and some blood work) must be sent to labs outside of Blue Mountain Clinic. We will forward your insurance information, although we cannot guarantee what will be covered, nor what the exact charge will be. Please be aware you will receive a separate bill from these other facilities. You must contact the outside lab directly if you have any billing questions.

COLLECTION POLICY - Our collection policy consists of an initial statement being billed following payment by insurance. If no payment is received, a second statement will be sent, and considered past due. Should no payment be made during that time, a third statement will be sent with a final notice letter. You will have 10 days to make payment arrangements. If no payment or contact is made you will be turned over to collections. **ALL THIRD PARTY COLLECTION FEES WILL BE YOUR RESPONSIBILITY**. These fees may include agency fees, attorney fees, and a collection fee of up to 50% of the account total added to the balance.

DISCHARGE POLICY- It is our policy to discharge patients from our practice who have been turned over to collections.

Because Blue Mountain Clinic's healthcare philosophy centers around our clients, it is of the utmost importance that you come to your appointments. It is our policy that you cancel at least 24 hours prior to your appointment. If you do not, you may be subject to* ***a $25.00 fee**, and may not be able to continue your care at BMC.*

I HAVE READ, UNDERSTAND AND AGREE TO THIS FINANCIAL POLICY

_____ _____ _____

Signature of Responsible Party *Print Name* *Date*