



### Board Certified in Gastroenterology

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# CAROLINA MOUNTAIN GASTROENTEROLOGY

a Division of Digestive Health Partners, P.A.

## Financial Policy

Due to the recent increase in the use of **high deductible health plans** coupled with the rising costs of collections, we have found it necessary to collect the amounts that will be owed by the patients for their procedure **prior** to their procedure date.

Please take note of the following changes below:

### CMG responsibility:

- Our staff will review your benefits with your insurance plan as a courtesy to you.
- You will receive a call from Benefits Verification staff informing you of the anticipated amount owed for upcoming procedure.
- The amount quoted is an estimate CMG provides to you based upon benefits given to us by your insurance plan, this is **NOT** a guarantee. The actual amount due may differ.

### Patient responsibility:

- Payment of estimated amount due prior to your procedure.

If you have questions about making payment arrangements, please call our billing office at 828-696-3099, option 6.

Should your individual circumstances dictate that a refund is due to you following your procedure, we will process any refunds to you in a prompt manner. Carolina Mountain Gastroenterology is committed to the success of your procedure outcome, and we sincerely appreciate your cooperation with this financial policy. Please contact us should you have questions or comments.

**I have read and understand the above agreement.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth