

THE WOMENS CLINIC OF VANCOUVER, PS
505 NE 87 AVE., SUITE 260
VANCOUVER WA 98664-4897
360-944-6931

WELCOME TO THE WOMENS CLINIC OF VANCOUVER, P.S. - FINANCIAL POLICY

CASH	<p>A deposit is required at the first office visit for any patient who is not covered by health insurance. You will receive an itemized statement showing the total amount owed by you.</p> <p>If you do not have insurance coverage and/or are unable to pay the patient pay balance within 30 days, you may contact the Account Representative assigned to your account and set up a payment plan.</p>
COPAYMENT	<p>Any copayment required by your insurance carrier must be paid before service is received. This is an insurance requirement. You may be rescheduled if you cannot pay your copay.</p>
CREDIT/DEBIT CARDS	<p>We accept Visa and MasterCard</p>
ESTIMATES	<p>The exact cost of service cannot be determined until after the provider has completed care. Any amount quoted is an ESTIMATE ONLY. Your actual bill may be higher or lower.</p>
INSURANCE	<p>The Women’s Clinic of Vancouver, P.S. participates in many health plans as either preferred or participating physicians. . We accept the contracted payment for our participation in these certain plans. You will be responsible for all balances unpaid by your health plan as the contract is between you and your insurance company. Although we may estimate what your plan may pay, the final determination of your eligibility and benefits will be made by your insurance carrier after they receive our claim.</p> <p>We bill your insurance as a courtesy. We allow up to 60 days for the insurance company to pay. Regardless of the insurance coverage, the responsibility for payment of your account remains yours at all times. Please call your carrier for benefits and referrals.</p> <p>It is ALWAYS best to bring your current insurance card with you to each appointment. If we do not have complete billing information, you will be billed directly. Most insurance companies have TIME LIMITS on claim submissions. You will be asked to sign a “waiver” of insurance benefits if we cannot confirm your insurance coverage.</p> <p>A monthly statement will be sent to you after your insurance carrier sends their payment. We expect full payment of the account within 30 days. If the balance cannot be paid within 30 days, we ask that you contact the Account Representative assigned to your account by calling 360-944-6931 for payment arrangements.</p>
RETURNED CHECKS	<p>There will be a \$25.00 fee charged to your account for NSF (insufficient funds) check returned to us by the bank. You may be dismissed from receiving service and the account may be turned over to a collection agency.</p>
PAST DUE	<p>If an account becomes past due and no payment arrangements have been made with the Account Representatives or if a payment plan agreement has not been kept, the account will be turned over to a collection agency. Your physician may choose not to see you for future services.</p>
MEDICAID	<p>We are contracted providers with Columbia United Providers. You are responsible to bring your CUP card and coupon to each visit. In the case of CUP-Basic Health, you must pay your copayment before each visit. Failure to do so may result in rescheduling the appointment.</p>