## **OFFICE POLICIES**

Thank you for choosing Lyric Audiology for your hearing healthcare needs. Our primary mission is to deliver the best and most comprehensive care available.

**<u>FINANCIAL POLICIES</u>**. An important part of the mission is making the cost of optimal care as easy and manageable for our patients as possible by offering several payment options.

**Payment is expected at time of service**. This includes all co-pays, co-insurances, deductibles and fees. For your convenience, we accept most major insurances and credit cards as well as checks and cash. We also have easy convenient payment plans<sup>1</sup>. SORRY, NO CREDIT CARDS ACCEPTED FOR FEES UNDER \$25.

For hearing aid purchases of any amount, a 50% deposit is required to secure your purchase. The deposit is required at the time of consultation. Payment in full is due at the time the hearing aid(s) is dispensed. For hearing aid repairs, payment in full is due prior to the repair. For any special orders, e.g., Assistive Listening Devices, accessories, etc., payment is due at time of order. NO EXCEPTIONS.

For patients with insurance, we are happy to work with your carrier to maximize your benefit and directly bill them for reimbursement for your hearing aids according to your carrier's guidelines.<sup>2</sup> PLEASE MAKE SURE YOU HAVE YOUR INSURANCE CARD WITH YOU AT YOUR INITIAL VISIT. PLEASE INFORM US OF ANY CHANGES IN YOUR INSURANCE.

**PAST DUE ACCOUNTS:** Any bill that is unpaid for 90 days is considered PAST DUE. If we have to turn your account over to collection, you will be charged 5% interest on the outstanding balance from the date your bill was due, and you will be responsible for all costs and expenses of collection including, but not limited to our reasonable attorneys' fees.

Lyric Audiology charges \$35 for returned checks.

**RECORDS REQUESTS:** All requests for records to be faxed or e-mailed MUST be made a MINIMUM of Five (5) business days in advance. For records that are to be mailed, a MINIMUM of ten (10) business days is required. It is your responsibility to ensure the timely delivery of your records. Any requests made with less than the required notice, will not be guaranteed for timely delivery. All requests need to have a written records release on file. For all requests that need to be mailed, there is a \$0.75 charge per page plus shipping costs, to be paid in advance.

**CANCELLATIONS:** Except in emergency cases (weather, etc.), all cancellations/reschedules must be made TWENTY-FOUR (24) hours in advance. **There will be a \$25 charge** for all no-shows, or cancellations with less than 24 hours notice. After two (2) no-shows or late cancellations, you will be discharged from the practice. If you are 15 minutes or more late for an appointment, we will try our best to accommodate you time permitting. However, it may be necessary to reschedule your appointment.

**WALK-INS:** Although Walk-Ins are always welcomed, it is recommended to call first to make sure the office is open, e.g., because of weather, provider out of office, etc., and to ensure that sufficient time is available to offer you the best service.

<sup>1</sup>Subject to credit approval

<sup>2</sup>If we do not receive payment from your insurance carrier within 30 days, or payment is denied, you will be responsible for payment of services.