

# Paradise Valley Medical Clinic

## Office Financial Policy

revised 7.1.25

Please read and sign our patient and financial office policies. Our goal is to educate and avoid any misunderstandings regarding our office policies and all financial liabilities. *Please be aware that you must provide correct and accurate information regarding your address and insurance. If you provide our office with false information, you will be responsible for all charges incurred during your visit.*

**Payment Policy:** Each patient is responsible for payment of all services provided at the time of service. We will submit claims to In-Network insurance plans only; however, it is the patient's responsibility to know the benefits of his or her own health plan before services are rendered. All In-Network insurance claim submissions are dependent on each patient providing accurate insurance information.

- **Important Notice:**  
Please be advised that we do **not accept any HMO plans or AHCCCS plans**. We are unable to schedule appointments for patients covered under these insurance policies.  
We recommend reviewing your insurance plan documents or contacting your insurance provider directly to find covered Healthcare Providers.
- **Self-Pay or Out-of-Network Insurances:** Payment is due at time of service, and we are strictly a “cash-pay entity” regarding Out of Network Insurances. **We do not submit claims to any Out of Network Commercial Insurance plans for any reason or circumstance.** Some insurance plans may allow patients or the patients’ representative to send claims to them directly for reimbursement. We may supply you with the necessary information you will need if you choose to submit claims to your insurance plan. **Please note:** the doctor's visit does not include lab work, vaccinations, injections, tests, or procedures, therefore extra charges may apply if Dr Lakin feels they are necessary for your medical care either at the time of service or afterward.
- **Medicare (in-network):** You are responsible for paying your annual deductible, co-payments, co-insurance and any non-covered services. Medicare Advantage or Medicare Replacement plans are **not** In-Network with this Office. Since these Advantage or Replacement plans are classified as Out-of-Network, they retain the right to modify or deny claims based on their Out-of-Network coverage policies.
- **Cigna PPO, OAP, First Health/CNN, AZFMC (in-network):** Patients are responsible for meeting their annual deductible and co-pays at time of service as well as any amount deemed by insurance to be patient responsibility.
- **Annual Administration Fee:** This practice does have an annual Administration Fee. All patients are expected to pay this fee yearly. The Admin Fee is billed and due during the anniversary month you first joined or re-established with the Practice. Please contact our office if you have any questions regarding the Admin Fee.
- **NSF Checks:** There is a \$45 charge for all non-sufficient checks. Patients are responsible for all charges.

### **Medical Records Policy:**

- There is a charge for any medical records requested by attorneys, record retrieval companies, etc. There is no charge for transmitting records to another covered medical entity, or physician's office. No records will be released without a legal signature. This is to protect your medical information and align with HIPAA guidelines. Please contact our office if you have any questions regarding Medical Record fees.
- We do not accept third party billing for auto accidents or injury accounts. Payment is due at the time of service and a receipt will be provided for your submission.

**Please sign & date, return to our office Staff, and retain a personal copy for future reference.**

Patient's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Patient's PRINTED Name: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

**\*\*Effective 7/15/2025 - PVMC will NO longer be submitting claims to Out of Network Commercial Insurance plans\*\***