

PACIFIC MEDICAL CLINIC

PAYMENT POLICY

As part of our commitment to offer excellent medical and professional care to your company and employees, the following is our payment policy in order to minimize any misunderstanding about fees or financial responsibilities. Our work related injuries service fees have been established by the CA work comp fee schedule; these fees are usual and customary and are non-negotiable. To reassure that not only are you getting the best healthcare for your employees our Pre-Employment services fees are very competitive. Pre-Employment service fees are negotiable upon former agreement.

Authorization: All companies are provided with authorization forms from Pacific Medical Clinic. These forms are to be properly filled out by the authorized personnel. This form is to be given to the employee to bring to Pacific Medical Clinic at the time of their visit. By the company filing out the Authorization forms it permits us (Pacific Medical Clinic) to treat the Employee. This form ultimately holds you (the company) responsible of all charges, including finance charges. Please note when Determination of injury is not work related the company is responsible for payment.

Company Billing: For Pre-Employment services provided on your behalf, Payment should be submitted upon receipt of bill. We will not penalize if payment is received within 30 Days. For First aide and work comp services that you requested be directed to you, under labor code Section 4603.2(b) payment for medical treatment provided by the authorized physician shall be made by the employer within 45 days of receipt. If payment is not received in a timely manner, late fee may be assessed and is the responsibility of employer. Please note we do provide payment arrangements when necessary on most accounts. Failure to comply with these statutes may result in us taking further action with collection agency.

Workers Compensation: Company is responsible for submitting all appropriate documentation to their insurance carrier and to provide Pacific Medical Clinic with Claim info. Under Labor Code 5402(c), after an employee files a claim the employer shall authorize the provision of all treatment for the alleged injury. Treatment should be provided until the liability for the claim is accepted or rejected. Until the claim is accepted or rejected, liability for medical treatment shall be limited to ten thousand dollars (\$10,000). If the claim is denied company will be responsible for payment in full. All reportable work comp injuries are to be reported to the insurance carrier in a timely manner to avoid any delays to the patients care.

Proof of Insurance: California Law requires that employers with one or more employees have workers compensation insurance coverage. Under labor code section 3700.5, failing to have work comp coverage is a criminal offense. If an employee gets hurt or sick because of work and you are not insured, you (the company) are responsible for paying all bills related to the injury or illness. Companies who do not provide proof of insurance to Pacific Medical Clinic are responsible for payment in full at the time of the employee visit.

Coverage Changes: If you change your Work Comp insurance carrier you are responsible to inform Pacific Medical Clinic of that change. If the bill for service is denied by the insurance carrier due to expiration of coverage you will be responsible for payment of all services rendered.

Payment Methods: For your convenience we accept various payment methods. We accept payment by checks, Debit and Credit cards (Visa, MasterCard, Discover and AMEX) and cash.

Our goal is to provide our clients with a comprehensive medical center they can rely on for excellent patient care. The purpose of this policy is to develop and sustain a continued professional and positive relationship.

Thank you for understanding our payment policy.

I have read and understand the payment policy and agree to abide by its guidelines.

Signature

Date

Print Name

Title