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Statement and Debt Collection Policy

Effective Date: 10/1/2024

1. Introduction

This policy outlines the procedures for invoicing and debt collection at **Lukes Chiropractic and Wellness PLLC**. The goal is to ensure that all patients understand their financial responsibilities and the steps taken by the clinic to recover unpaid debts in a fair, transparent, and professional manner.

2. Responsibility

Patients are responsible for understanding their insurance coverage and for paying all fees for covered and non-covered services rendered by the clinic. This includes any co-pays, co-insurance, deductibles, and balances not covered by insurance.

3. Payment Terms

- **Time of Service Fees:** All services provided by Lukes Chiropractic and Wellness PLLC are charged and due at the time of service.
- Insurance Claims: The clinic will assist in submitting claims to your insurance provider. However, patients are fully responsible for any unpaid balances, including co-pays, deductibles, and services not covered by their insurance plan. Any waiver of unpaid balances, co-pays, deductibles, or non-covered services is illegal and considered insurance fraud.
- Medical Necessity: Your insurance company only covers services received by you if they are medically necessary. See your insurance contract for the definition of medical necessity.
- **Cash Payments:** For non-covered services or services not deemed medically necessary by your insurance company, payment is due at the time the service is rendered.
- **Payment Due Date:** Full payment is expected **upon receipt** of a statement unless a payment plan has been arranged prior.
- Accepted Payment Methods: Payments can be made via cash, check, debit card, and most major credit cards (except American Express and Discover). We also accept HSA and Flex Spending Account cards.

4. Statement Issuance

Statement Issuance:

- For Cash Services: Physical statements are unable to be generated at the exact time of service, an
 itemized receipt can be provided after payment is made and applied to the date of service if the patient
 wishes.
- For Insurance Services: A statement will be issued after we receive the Explanation of Benefits (EOB)
 from your insurance company. These statements are typically sent out during the first week of the
 month.
- **Detailed Breakdown:** Patients will receive an EOB from their insurance provider. The EOB outlines the services provided, the amounts paid by insurance, and any outstanding balance that remains the patient's responsibility. It is important for patients to review these documents carefully.
- **Payment Plans:** If a patient cannot pay the full balance due, they may request a payment plan. *Payment plans* are approved on a case-by-case basis and must be agreed upon in writing. Failure to adhere to the terms of the payment plan will result in the account returning to standard collection procedures.

5. Late Payments

- **Grace Period:** Statements are due upon receipt. If no payment is received **within 30 days of statement**, the account will be considered late.
- **Payment Reminders:** If no payment is received by the due date and no communication from the patient has been made to arrange a payment plan, the patient will receive a second notice including a late fee.

6. Debt Collection Procedures

Step 1: Internal Collection Attempts

- First Notice: Initial billing or first statement after service or receipt of the EOB.
- Second Notice: A second statement will be sent out the following month with a late fee added.
- Final Notice: A final warning including an additional late fee indicating that the account will be sent to a third-party collections agency if not settled.

• Step 2: Third-Party Collections

Referral to Collections: If the account remains unpaid 10 days after the final notice, it will be referred to
a third-party collection agency with 30% interest added. At this point, the patient must direct all
communications regarding the debt to the collection agency. Additional collection fees or charges may
apply and will be the responsibility of the patient.

Step 3: Legal Action

 Legal Recourse: If the collection agency is unable to recover the debt, they reserve the right to pursue legal action. Patients may be held liable for any legal fees associated with debt recovery.

7. Disputed Charges

• **Dispute Resolution:** If a patient believes there is an error on their statement, they must notify the clinic's billing department within **10 business days** of the date of the latest statement. The clinic will investigate and, if necessary, adjust the balance. During the investigation, the patient is still responsible for paying any undisputed portions of the statement.

8. Financial Hardship

• **Hardship Consideration:** We understand that patients may experience financial difficulties. If this occurs, patients are encouraged to contact the billing office to discuss a payment plan.

9. Patient Responsibilities

- Accurate Information: Patients are responsible for providing accurate and up-to-date contact information, including mailing address, phone number, and email address, to ensure proper receipt of statements and payment reminders.
- Timely Payment: Patients are responsible for making timely payments as outlined in this policy.
- **Communication:** If there is difficulty in paying a statement, patients must contact the clinic promptly to talk about arranging an alternative payment plan.

10. Contact Information

For any billing inquiries, disputes, or to arrange a payment plan, please contact our office at 218-751-4936 and ask to speak to billing.

Conclusion

This policy is designed to maintain financial integrity while providing patients with clarity on their responsibilities. **Lukes Chiropractic and Wellness PLLC** strives to make financial interactions transparent and manageable, ensuring that patients receive the care they need without undue financial burden.