

Women's Health Care Center of Houston

Memorial City - Memorial Hermann Tower – 929 Gessner Rd, Suite 2225, Houston, TX 77024
Katy – 23232 Kingsland Blvd, Katy, TX 77494 | CyFair – 13114 FM 1960, Suite 105, Houston, TX 77065
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Financial Policy and Contract

We are so pleased that you have chosen our practice for your women's health care services. We provide complete obstetric and gynecologic care for women of all ages and lifestyles. Your thorough understanding of our financial policy is important to our professional relationship. Please carefully read and sign the following policy and contract. Please clarify any questions or concerns with our staff prior to signing.

- We require a copy of all current insurance cards as well as driver's license or other legal photo ID. Please be prepared to present these at each visit.
- All new patients must complete our patient information form before services are rendered.
- We accept payment in the following forms: Cash, Check, Visa, MasterCard, American Express and Discover. There is a \$35 fee for any returned check.
- For All Insurances: Please review your benefit summary carefully. It is your responsibility to obtain benefit explanations directly from your insurance carrier if you have any benefit or coverage related questions. Well Woman or Annual Exams are usually considered preventive care. Coverage for this may vary among insurance plans.
- Participating Insurance: We participate with most insurance companies. Co-pays and/or deductibles are due at time of service. For any non-covered services, payment in full is due at time of service.
- Non-Participating Insurances or No Insurance/Self-Pay: Payment in full is required at time of service.
- For Medicaid: We do not retroactively file claims to Medicaid for services previously provided to you (as a non-Medicaid patient) if at a later date you receive retroactive Medicaid coverage. Please notify us if you do enroll with Medicaid. Once enrolled, you will receive a monthly Medicaid Identification letter (Form H3087 or H1027). Please present these monthly Identification letters at each visit.
- For Medicare: Medicare covers breast, pelvic exam and pap smear based on certain criteria. Medicare generally covers Well Woman preventive exams every 24 months, yearly only if high risk.
- Obstetrical Patients: After your visit to confirm pregnancy you will be referred to the OB Coordinator to review insurance coverage and benefit information and to determine your financial obligation for pregnancy care.
- Records, Forms and Fees: There is a fee for medical record copies as well as for completion of forms.

I understand and agree that health insurance coverage is a contract between me and my insurance carrier. I understand that the practice will prepare any necessary reports/claims to assist me in pursuit of coverage/reimbursement from my primary insurance company and that any amounts authorized will be paid directly to the practice. However, I fully and clearly understand and agree that all services rendered to me are charged directly to me and that I am personally and ultimately responsible for payment. If I fail to provide the practice with current insurance information prior to service, I understand that I am personally financially responsible for those services. I hereby authorize Women's Health Care Center of Houston to furnish all necessary information to my insurance carriers concerning my health, any illness and treatment.

If patient is a minor: I am the parent and/or legal guardian of said patient and hereby agree that I am responsible for all services rendered to the patient.

Printed Patient Name

Patient Signature

Date

Printed Parent/Guardian Name

Parent/Guardian Signature

Date