

# PATIENT FINANCIAL POLICY

Financial, Appointment Fees & Cancellations and Package Purchases

In order to promote understanding between our patients and the practice, we ask that you read thoroughly the Patient Policies below. If you have any questions, please email info@bcaps.com or ask to speak with our Office Manager. We are committed to providing you with the best possible care and service and your complete understanding of your responsibilities are a key element in providing an exceptional experience at the Bengtson Center.

### APPOINTMENT SCHEDULING & CANCELLATION FEES FOR SKINCARE, LASER AND INJECTABLES:

- · When scheduling your appointment, you will be required to provide a debit or credit card which we will keep on file.
- Should you need to **cancel or reschedule** your appointment, we require notice 24 hours prior to your scheduled appointment time. A fee of \$50 will be charged to your credit card on file if the appointment is missed.
- If you are running late to your scheduled appointment, we will always do our best to accommodate you; however, if you are more than 20 minutes late:
  - If possible we will keep your appointment and may need to shorten your treatment time to keep your provider on schedule for their next patient or,
  - We may need to cancel the appointment entirely and will charge \$50 to the credit card on file.

#### APPOINTMENT ARRIVAL EXPECTATIONS:

- **Identity Verification**: A valid driver's license or state issued ID card is required to be shown at your visit to verify that we are providing services to the appropriate person and to protect our patients from identity theft.
- **Minors**: We will hold the parent or guardian accompanying the minor on the first visit responsible for expenses incurred, for this and all other subsequent visits.

#### FINANCIAL AND PAYMENT EXPECTATIONS:

- · Payment Due: Skin Care, Laser and Injectable Treatments are due at the time of service.
- **Pre-Paid Gift Cards:** Are not acceptable forms of payment towards Non-Surgical Procedures and/or Cosmetic Surgeries.
- Payment Methods: May be made by Cash, Check, American Express, Discover, MasterCard or Visa. We
  also have vetted outside medical finance companies on your behalf. Please let us know if you would like
  applications for these options.
- **Returned Checks:** The Bengtson Center will charge a \$40 return check fee for any checks returned NSF by the bank.

#### PACKAGE PURCHASES

Packages have built in savings for our patients with the intent that all treatments will be used to completion.

- Package Treatments: May not be used for any other product or treatment other than the specified package purchase.
- Cancellation of Package: If you choose to cancel a package or would like to "switch" services in the middle of a package, the services already performed from that package along with any post-procedure care products will be billed at full price. If there is a remaining payment to you from the adjustments, it will be applied directly on a Bengtson Center gift card. If there is a remaining payment from you due to the cancellation of the package we will charge your credit card on file. The package adjustment can take up to 7 business days to complete.

If you have received a treatment outside of your package purchased you must pay for the treatment immediately following your appointment.

## COSMETIC SURGERY "CS" / NON-SURGICAL PROCEDURES "NSP"

A 30% deposit is required on all Cosmetic Surgeries (CS) and Non-Surgical Procedures (NSP) when scheduled. The balance for these must be **paid in full three weeks prior to your procedure**. If unpaid by this date, our office will follow up with you and reserves the right to cancel/reschedule your surgery/procedure.

If your CS or NSP is scheduled <u>less than 3 weeks in advance</u> payment will be required in full at the time of scheduling.

Payments may be made with Cash, Cashiers Check, American Express, Discover, MasterCard or Visa. If you are interested in working with an outside financing company please contact our office for information.

**CS Cancellation**: We understand that a situation could arise which would require you to postpone your surgery. However, please understand that a cancellation/postponement affects many individuals including the healthcare professionals scheduled for your procedure as well as other patients. Therefore, we would ask that as soon as you become aware of the need to cancel/postpone your surgery, you notify our office.

Please keep in mind that if surgery is cancelled <u>less than 3 weeks prior</u> to your surgery date, you will be charged a \$300 cancellation fee. If cancelled <u>less than 2 weeks prior</u>, you will be charged a \$600 cancellation fee. If cancelled <u>one week prior</u> to surgery, you will be charged 30% of your surgery quote. If your surgery is cancelled <u>less than 48 hours prior</u> to your surgery, you will be charged 50% of your surgery quote. Once assessed, the cancellation fee can be applied to a future surgery when rescheduled within 6 months of your original surgery date.

**NSP Cancellation**: If cancelled <u>less than 48 hours prior</u> to the scheduled date, you will be charged 30% of your procedure.

I have read and understand the financial policy of the Bengtson Center for Aesthetics and Plastic Surgery and agree to its terms. I understand that such terms may be amended by the practice at any time.

Patient Name	Signature of Patient	Date
 Witness	Signature of Witness	Date

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