## ROBERT A. SCHUMER, M.D., PH.D. HUDSON VALLEY GLAUCOMA CARE 150 Aaron Court Kingston, NY 12401

(845) 331-6670 Fax: (845) 331-6672 RSchumerMD@gmail.com

Ophthalmology
Specializing in Consultation, Management, and
Laser Surgery for Adult Glaucoma

## **Patient Payment Policy**

If you have medical insurance coverage, it is your responsibility to present your most current ID card and to inform us to the best of your ability about the type(s) of coverage you have. This office will submit insurance claims on your behalf for provided services.

It is also your responsibility to verify that your insurance is active and that services with Dr. Schumer at Hudson Valley Glaucoma Care will be covered. We are happy to assist in answering insurance-related questions, but ultimately, it is your insurance and it is your responsibility to make sure that your visit with us will be covered.

We participate with most regional insurance plans (and Medicare), and will accept participating insurance company payment(s) as payment-in-full, except for co-pays, co-insurance, and deductibles.

If your insurance does not cover the visit, or does not cover the full cost of the visit (for example, because of a co-pay, or because you have a high-deductible plan), the full charges for the visit, or any balance after your insurance has made payment, are your responsibility.

For new patients with high deductible plans, it is office policy, on your initial visit, to collect an estimated payment based on the actual examination. We will submit the claim to your insurance, and once it has processed, we will balance bill or refund you any difference, as appropriate.

For those with no insurance, we are happy to discuss the estimated fees prior to your visit.

Please note that co-pays and deductibles are due in the office on the date of service. Personal checks or cash are preferred methods of payment but we accept credit cards. For those for whom payment of fees is a hardship, we are happy to discuss payment plans or waivers.

Patient Signature		
Printed Name	Date	