**Kentucky Mountain Health Alliance, Inc.**

**Financial Policy Form**

MRN #:

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We are committed to providing you with the best possible medical care. If you have special needs; we are here to work with you. The following information is provided to avoid any misunderstanding or disagreement concerning your payment for professional services.

1. Our office accepts most insurance plans (Medicare, Medicaid, and commercial insurance). It is your responsibility to:

* Bring your insurance card at every visit.
* Be prepared to pay your copayment or minimal fee. Payment can be made by cash or check.
* You will be billed for medical care not covered under your insurance company.

1. If you have insurance in which we do not participate, our office is happy to file the claim upon request; however, you are expected to pay the minimal payment.
2. If you are unable to pay for necessary medical care, you may be eligible for financial assistance and receive a discount based on your household income. Our clinic provides discounts based on a sliding fee scale to individuals who do not have any insurance coverage. It is the patient's responsibility to bring all required documentation before we can process a sliding fee application. Proper proof of income is the most current tax return, the most recent paystubs, most recent statement from social services (such as and Award Letter), KMHA self-attestation of income form, or a letter from the caregiver with explicit amounts of money that are given on a monthly basis. Sliding scale discounts will be based on the most recent Federal Poverty Index (FPI) guidelines. Patients lacking proper proof of income at the initial visit must provide this documentation within sixty (60) business days or the Sliding Scale Program eligibility provision will be cancelled. Should this action occur, the patient will then be placed in the full-pay (100%) category until income verification is provided unless other arrangements have been approved by the registration supervisor.
3. If the patient is a minor (18 years or younger), the parent or guardian must sign below. The parent, guardian of a minor is responsible for the minimal payment at the time of service and any services will be billed.
4. If you have questions about your insurance or would like to set up a payment plan, we are happy to help you.

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Our clinic staff firmly believes that a good provider/patient relationship is based upon understanding and good communications. Questions about financial arrangements should be directed to the Receptionist or Receptionist Supervisor. Please sign that you have read and agree to this Financial Policy.

***(Revised 02/06/2025)***