Northwest Dermatology Billing and Insurance Procedures

Insurance:

Northwest Dermatology accepts most insurance plans with the most common plans listed below. Please call our office at (509) 444-6367 prior to scheduling your appointment to verify if our office is contracted with your insurance plan.

- Aetna
- AARP
- Asuris Northwest Health
- Cigna
- First Choice Health Network
- Kaiser Premanente
- Medicare

- PHCS/Multiplan
- Premera
- Rail Road Medicare
- Regence BlueShield
- Sterling
- Uniform
- United Healthcare (Not contracted with Community Plan)

Responsibility as a Patient:

We encourage you to review the benefits and requirements of your specific insurance plan*. Northwest Dermatology contracts with multiple insurance carriers and each carrier may have several different plans and/or policies. Your health plan may make you responsible for co-pays, deductibles, coinsurance and non-covered services. Northwest Dermatology is contractually obligated to collect these amounts. You are responsible for obtaining any insurance required referrals.

Your insurance card(s) are necessary during the check-in process at the time of your appointment. Our front desk will ask to review your insurance card at each visit to ensure that we have the most up-to-date information, including your current address and phone number. If there are discrepancies, the front desk will update the information and scan a copy of your current insurance and/or ID card. The purpose of this process is to better serve you and alleviate any unnecessary billing problems.

*Please confirm with your insurance company that they are contracted with Northwest Dermatology at 757 E. Holland Ave. Spokane, WA 99218 prior to your first visit.

Please note: We understand insurance plans and/or benefits are updated or may change. Please be sure to notify our clinic of any new insurance changes prior to any follow up visits.

Billing Process:

If we are contracted with your insurance company, the billing process will include the following steps:

- After your visit with the provider, a claim is created in our patient management system.
- This claim is sent to your insurance company (if applicable) or directly to you if there is no insurance on file. Your insurance company will process the claim according to your benefit plan. Any patient responsibility remaining will be submitted to you in statement form for payment to our office. If there is not a balance due, then a billing statement will not be generated.
- If a billing statement is sent to you, it will include an itemization of your charges along with any payments received from your insurance company. These payments and charges will correspond to the Explanation of Benefits (EOB) you received from your insurance company.

Billing statements are mailed on a 28 day cycle. For your convenience, our office accepts Cash, Check, Visa, Discover and MasterCard as payment options on your account.

We understand there are circumstances that may warrant an extended payment plan. Please contact our billing customer service department at (509) 444-6367 option 5 if you need to request payment arrangements. We will gladly work with you to arrange a mutually satisfactory payment plan.

Questions:

Our billing customer service representatives are available to assist you with your account(s) or billing questions by calling (509) 444-6367 option 5 during regular business hours.