

Fees and Payment Policy

Your responsibilities for payment as well as rights under federal law are explained in the *Insurance and Payment Authorization* and *No Surprises Act Good Faith Estimate* documents that were sent to you for your signature upon establishing care with Singularity. This document supplements those with practice specific information and does not mitigate your liabilities for payment or supersede any rights provided to you as explained in those documents.

Insurance

We are in-network with BCBS Texas. BCBS Texas administers non-medicaid BCBS plans from all over the country including some Anthem plans from other states.

BCBS plans purchased through the ACA exchange may carve out mental health coverage to other carriers, and we may be out of network.

Some BCBS HMO plans require a referral/preapproval for mental health services.

You can always choose whether or not to use your insurance to cover your care. If you have a deductible and do not think you will meet it for the year, you may choose to pay the private pay rate instead, but once a claim is filed your carrier determines what you owe.

We're happy to help you navigate insurance use but **you are responsible for understanding your coverage and paying fees determined by your plan**. Your insurance will provide you with a paper or electronic document called an *Explanation of Benefits* after your claim is processed that breaks down the billing and payment.

Out of Network

Dr Toups is out of network for other carriers. If you see something online suggesting otherwise, it is incorrect. If you have insurance other than a BCBS Texas plan, you will be charged the private pay rates listed in the *No Surprises Act Good Faith Estimate* document.

You should familiarize yourself with your out of network benefits to decide if you would like to submit a claim yourself using a **superbill**, and have your carrier reimburse you. Some plans pay most of the cost, many about half, and some will not cover out of network services at all unless certain conditions are met.

If you would like a superbill, we are happy to provide one; usually you have 90 days to file a claim.

Out of network coverage does not require any direct agreement between Singularity and insurance carriers, so if they ask you to ask us for any forms etc, know this is not really needed. **Out of network claims are between you and your carrier.**

Uninsured

If you have no insurance then you will be offered the private pay fee rates, which are detailed in the *No Surprises Act Good Faith Estimate* document.

We generally do not provide sliding scale fees.

Payments

Payment for your portion of the fee is due at the time of the visit or when the amount is known (i.e. when your claim is processed).

If you have a copay or are paying the private pay rate, you will typically be charged on the day of the visit.

If you have a deductible/coinsurance plan, you will be charged when we review claims and reconcile pending charges, which may be up to a month after your claim is filed. Generally if you have a small co-insurance amount (<\$50) we will just charge your card on file.

If you have a full payment, generally we will invoice you, to avoid putting a larger unexpected charge on your card. You may indicate to us that you would prefer we just charge your card rather than asking you to log in to the portal and pay the invoice. If you do not pay your invoice within 30 days we may charge your card and notify you.

We require that you maintain a card on file with us. This is best for your security, as card information is stored with BlueFin, our payment processor and is not directly accessed by anyone at Singularity. It allows us to easily run payments without the use of a physical device and/or your presence in the office.

Although we will not deny you necessary care because your card is expired or declined, we will eventually terminate you from the practice if payment for outstanding fees is not made. If for any reason you are unable to use online payment via card, please let us know so we can make alternate arrangements.

We are happy to work with patients in good faith to pay outstanding fees for care.