

LCM SKIN AND LASER CLINIC BILLING POLICY



E-mail: info@skinandlaserclinic.co.za ; **Website:** www.lcmskinandlaserclinic.co.za

Tel: 012 346 5363 ; **Address:** 273 Tram Street, Nieuw Mucklenuek, Pretoria, 0181

This billing policy forms part of our Terms & Conditions and should be read with the Terms and Conditions.

By choosing the Clinic as your healthcare service provider you agree to the following:

1. This Clinic charges the fees it regards as appropriate in terms of the experience, services and training of the professionals working in the Clinic, as well as the cost-base of the Clinic. These fees are independently determined and are not regulated by the fees schedule as set out by the Department of Health. Competition law dictates that practices may not agree to charge the same or similar fees.
2. Patients are kindly requested to settle their account directly after treatments. We only accept card payments or Electronic Funds Transfer. We unfortunately DO NOT ACCEPT cash.
3. All treatments are payable upon each visit prior to leaving the Clinic.
4. All our fees include Vat.
5. Fees may be increased on an annual basis.
6. A schedule of the most commonly charged fees are available from us on request via email or in hard copy. Our fees work on the type of Laser treatment provided, the amount of shots required and the affected area being treated. Fees can also differ depending on how your body reacts to such treatment.
7. The Clinic will provide patients with a quotation\estimate for the treatments which are required and where it is able to do so. It should be noted that healthcare is not an exact numerical science, and the duration of services, or the number of items used cannot always be exactly estimated. In some cases the amount of treatments needed are calculated on the specific patient's needs and this can vary. Factors that could influence a quotation is duration of the treatment, procedures undertaken and products used and how your body reacts to such treatment.
8. The law allows us to step in in order to save your life, or to prevent or reduce harm to you. We, or any other professional who may need to step in, will charge for the costs of this. Your Therapist will do her best to provide you with the most accurate quotation/ estimate and the amount of treatments you will require.
9. Should any other health facilities, such as hospitals, theatre's, clinics, other doctors (such as anaesthetists), or other healthcare professionals (occupational therapists, etc.) be required for your treatment, such facilities and professionals will charge their own fees in addition to the fees of this Clinic and you will be liable to make payment for such healthcare services provided to you directly to the provider.
10. You must, prior to any treatment plan being commenced, discuss the quotation/ estimate and your treatment plan with your Therapist.
11. Please note that all quotations will only be valid for a 30 (Thirty) day period. In the event that you accept the quotation provided, within the 30 day period, a signed copy of the quotation must be handed to this Clinic.
12. This practice is not contracted to any medical scheme (or medical scheme options) and you are responsible for payment of your account prior to leaving the Clinic.
13. The fees that we charge and the benefits awarded by your scheme may not overlap. In most cases your scheme will not pay for the cost of cosmetic treatments. Various schemes reimburse for health services and goods at different levels, so the amounts payable by the patient may differ from scheme to scheme, or from one option/ plan to another. This means that any claims you submit to your scheme, after payment to this Clinic, may not be reimbursed in part or in full.

Should you feel aggrieved by the decisions of your medical scheme, you can approach the:

Council for Medical Schemes at complaints@medicalschemes.com or fax (012) 431-0608 or

National Consumer Commission at NNetshitomboni@thencc.co.za or fax 086 151 5229

14. We do not submit accounts to the Medical Aid scheme on your behalf and it must be noted that treatments received at this clinic will often be seen by your Medical Aid Scheme as cosmetic. Discussing reimbursement for treatment with your medical aid is your responsibility before commencing with any treatment.
15. Also note that your medical scheme may require pre-authorisation and/ or a motivation prior to certain treatments. Pre-authorisation or scheme approval is, according to schemes, no guarantee of payment. Your referring doctor will provide any motivation requested.
16. All treatments in the Clinic must be paid by the patient even if a medical aid has authorized the treatment.
17. If there are any specific financial circumstances you must bring to our attention, please do so sooner rather than later.
18. We urge you, should you not be in a position to pay our account, to make payment arrangements with us as soon as you become aware of a problem with paying us.
19. In exceptional circumstances should you (the patient or person responsible for the account) not pay your account within 30 calendar days, we will give you notice of 20 business days where after we will refer your account to [an attorney/ a debt collecting agency]. This will attract additional collection- and other fees. We reserve the right to charge interest of 2% per month on overdue accounts.
20. You will also be responsible for all costs relating to the debt collecting, such as commissions and fees levied by the debt collector or attorney.
21. You confirm that you understand that, as a parent or legal guardian, you are legally liable to cover the cost of your child's healthcare, even if the Children's Act allows the child to provide consent to treatment without your consent (children 12 to 18 years who understand the implications of the treatment).
22. Please ensure that we always have your latest contact details to prevent you from missing any important communication from us.
23. Employment, insurance, Road Accident Fund and Compensation Fund (workplace injuries/ disease) are dealt with according to the specific rules set by such bodies. Please inform us should you fall into these categories so that we can explain billing in these cases to you.
24. LCM Skin and Laser Clinic is not a Medical Practice and therefore not registered with the Health Professions Council of South Africa. Not is the LCM Skin & Laser Clinic registered at the Board of Health Care Funders.

By my signature hereto I acknowledge that I have read the contents of this billing policy and accept the terms contained herein.

Client Signature

Printed Full Name of Signatory

Date