

FINANCIAL AGREEMENT

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Roswell MindCare
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Card on File Requirement

All clients must maintain a valid credit or debit card on file as a condition of scheduling and receiving services, regardless of insurance status.

Failure to maintain a valid payment method may result in suspension or termination of services.

Authorization

By signing below, you authorize Roswell Infusions LLC DBA Roswell MindCare ("the Practice") to charge your card through Stripe via SimplePractice or another secure merchant processor for services rendered.

This authorization includes:

- Copays, coinsurance, deductibles
- Private-pay balances
- Late cancellation and no-show fees
- Crisis-related services
- Administrative time related to unpaid balances
- Any balance not covered by insurance

Charges will appear on your bank or credit card statement.

Cancellation & No-Show Fees

- Less than 24 hours' notice: \$50
- Arrival 15+ minutes late: \$50
- No-show without notice: \$100

These fees are not billable to insurance and will be charged to the card on file.

Insurance & Balance Responsibility

Insurance claims are submitted by RMC based on the cards and information provided by the client. RMC may verify insurance eligibility and obtain an estimate of benefits as a courtesy. Verification of eligibility or benefits is not a guarantee that an insurance company will pay a claim. Final patient responsibility is determined by the insurance company when the claim is processed.

You are responsible for:

- Verifying your coverage
- Maintaining accurate insurance information
- All balances not paid by insurance

If a claim is denied due to incorrect, missing, inactive, or undisclosed coverage, you are financially responsible for the full amount.

When a recurring copay, coinsurance amount, or other patient responsibility can be reasonably determined in advance, you will be notified of the expected amount and your card may be automatically charged following each service. Any additional amount determined after insurance processes the claim will be handled under the Accrued Balances policy below.

Gross Receipts Tax

Self-pay services and applicable fees are subject to New Mexico Gross Receipts Tax. Insurance copays are not taxed.

Accrued Balances

For accrued balances (high deductibles, insurance delays, unpaid copays), you will receive at least 7 days' notice before the card is charged.

If funds are insufficient, partial charges may be processed until the balance is paid in full.

Returned payments or chargebacks may incur additional processing fees.

Payment plans or alternative arrangements may be available on a case by case basis and requires client communication.

Collections & Legal Action

Balances unpaid after 90 days may be referred to collections.

Balances unpaid after 180 days may be pursued through legal action, including small claims court.

Duration of Authorization

This authorization remains in effect until revoked in writing. Revocation does not eliminate responsibility for outstanding balances. Revocation of this agreement may result in termination of services.

Cardholder Certification

I certify that I am an authorized user of the card provided and agree to the terms of this agreement.

If the cardholder is not the client (for example, a parent, spouse, or other responsible party), contact Roswell MindCare for additional instructions and disclosures.

