



**YELLOWSTONE  
DERMATOLOGY  
ASSOCIATES**

## **Payment Policy**

All outstanding balances are due prior to service.

Copay amount is due at time of service.

Yellowstone Dermatology Associates reserves the right to refuse service to anyone with a past due balance.

Unpaid account balances over 90 days from the date of service, excluding a prearranged payment plan, will be turned over to a collection agency.

178 S 32nd St W  
Suite 3  
Billings, MT 59102  
(406) 702-1323

720 Lindsay Ln  
Suite B  
Cody, WY 82414  
(307) 219-5959

1301 Avon St  
Suite A  
Sheridan, WY 82801  
(307) 683-0337



# YELLOWSTONE DERMATOLOGY ASSOCIATES

Yellowstone Dermatology Associates requires payment for all medical services on the date of your visit.

Copayments will be collected at the time of your check in.

For patients with health insurance, Yellowstone Dermatology Associates will submit all charges to your medical insurance carrier. The patient is responsible for all charges that their insurance company does not pay, including but not limited to any additional copays, coinsurance, deductibles, and non-covered services.

I hereby authorize all insurance benefits to be paid directly to Yellowstone Dermatology Associates. I further authorize the release of any medical information necessary to process all insurance claims.

Unpaid account balances over 90 days from the date of service, excluding accounts on a prearranged payment plan, will be turned over to a collection agency and patient may be subject to dismissal from the practice.

I have read and understand this payment policy. I accept responsibility for payment in full of all my medical services.

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