

ELLEN A. MAHONY, MD, PC. FINANCIAL POLICIES (Revised 7/22/2025)

SURGERY: Surgery fees include Dr. Mahony's fees and any associated procedure costs, including implants, custom garments, etc. Anesthesia and operating room charges are billed separately through the anesthesia provider and medical facility.

_____ I acknowledge that on choosing to reserve a surgical date: I will be required to pay a 20% non-refundable reservation and surgical preparation fee, applicable to the substantial amount of clinical and administrative coordination for my surgery.

Care Credit may not be used for the 20% reservation and surgical preparation fee.

Dates are available as operating room time permits on a first-come, first-served basis.

_____ The 80% balance payment, in full, is due at the pre-operative visit and a minimum of 21 days prior to surgery.

The 80% balance payment is applied to the pre-operative visit, the surgery and the post-operative visit.

Payment can be made by cash, credit card, bank check or CareCredit.

_____ ***Refunds related to surgical cancellations are as follows:***

-Any surgery cancelled within 14 days of the surgical date will result in forfeiture of 50% surgical fees.

-Any surgery once performed is not refundable.

-It is required that I fully disclose my medical history and current medical information, prior to the surgery, to ensure effective risk management

-Any cancellation due to either withholding medical information or providing incomplete medical information will not be rescheduled and result in total forfeiture of non-refundable 20% reservation and 50% surgical fees.

-Request to reschedule surgery is at the discretion of Dr. Mahony and, if approved, will follow this policy and require a \$500 rescheduling fee.

_____ ***Facility and Anesthesia***

The charge provided for facility and anesthesia fees is always an estimate.

If the procedure takes longer than expected, I will be billed for the balance of their fees. If the procedure takes less time, I will receive a refund.

The practice does not have the ability to access any billing information which pertains to the facility or anesthesia. If I have any questions about my anesthesia or facility bills, I will contact them directly at the numbers listed on my quote.

Ellen A. Mahony, MD has no financial interest nor receives any compensation from the facility and/or anesthesia groups. Dr. Mahony has selected facilities which she believes are reasonably priced but not at a sacrifice of quality or safety.

_____ **NON-SURGICAL OFFICE SERVICES:** I acknowledge that on choosing to reserve a non-surgical office service: Credit card information/deposit is required at the time of scheduling. All reservations, deposits, products and services are non-refundable.

_____ ***Cancellations related to Non-Surgical Office Services/Injectables/Consults are as follows:***

- If I wish to cancel/reschedule an consultation/office reservation, I am required to contact the practice a minimum of 72 hours prior to my appointment.

-Failure to do so, for Non-surgical procedures will result in a forfeiture of associated payments.

-Failure to do so, for Injectable appointments will result in a \$100 charge to my card on file.

-Failure to do so, for Consult appointments will result in a \$100 charge to my card on file.

- A new payment is required to reserve a new appointment/non-surgical service date/time,

I have read the above and understand and agree to these policies regarding charges, payments, refunds and cancellations.

Patient Signature _____ Patient Name: _____ Date _____