

OSU Veterinary Medical Hospital (VMH) Financial Policy

Welcome! We are pleased you selected us to provide the highest quality veterinary care for your pet or animal. We will do our best to earn your continued business. Communication is important, therefore, we feel it is important for you to know our payment policy. Please carefully read the information below to familiarize yourself with our policy. Should you have questions, please ask one of the receptionists. Should questions arise after your departure from the VMH, please phone the Business Office at (405) 744-8571.

1. **Full payment is expected upon discharge of your pet/animal from the hospital.**
2. Insured cases are accepted, however, the VMH will not assume responsibility for filing claims or collecting from an insurance company. Client is responsible for paying VMH and filing for reimbursement from insurance company.
3. Acceptable forms of payment are **cash, personal check** (state law prohibits acceptance of two-party or post-dated checks), **VISA, MasterCard, American Express, Discover** or **CareCredit** (See #7).
4. For most patients requiring hospitalization and/or more costly outpatient procedures, you will be provided a written estimate of charges by the doctor. This estimate will include a brief summary of procedures and a range of total estimated cost.
5. **Clients are required to pay an initial payment/deposit equal to 80 percent of the high end of the estimated charges upon admitting their pet/animal to the VMH.**
6. At times it may become necessary to revise the initial estimated charges to cover the cost of additional procedures and treatments that were not anticipated upon initial examination and diagnosis. Should this become necessary, you will be notified of the revised estimate for your approval to proceed. At that time you will also be requested to make an additional deposit so that total deposits equal 80 percent of revised estimate.
7. New clients or clients not meeting requirements outlined in #6 may apply to CareCredit for a line-of-credit. CareCredit is an independent financial agency and credit is extended only upon approved credit check. Depending on amount borrowed, loan is usually interest free if repaid within 12 months. Repayment plans longer than 12 months are charged an annual percentage rate. Billing and payments are handled entirely through CareCredit. You may complete a CareCredit credit application and request we submit it for you, you may call CareCredit directly to apply for an account by dialing 800-365- 8295 or you may apply online at www.carecredit.com.
8. Any charges (up to 33 percent of the original debt), and in some cases, court costs and attorney fees incurred by the University in an effort to collect on delinquent accounts will be assessed to and will be the responsibility of the account holder. Delinquent account information is disclosed to credit reporting agencies, which could endanger your credit rating on a local and/or national level. The hospital cooperates with the District Attorney's Office in collection of insufficient fund checks.

I certify by my signature that I have read and understand the financial policies detailed in this document.

Signature _____ **Date** _____