

FINANCIAL POLICY

We believe that a clear definition of our office policies will allow both you, the patient, and us, the doctor, to concentrate on the big issue---REGAINING AND MAINTAINING YOUR HEALTH!

1. All co-payments and deductible (if not met) are expected at the time of service, unless payment arrangements have been approved in advance by our staff. We accept cash, checks, MasterCard, Visa, and Discover. Returned checks may be subject to additional collection fees.
2. We will be happy to bill your insurance for you if the proper information is provided. We do not guarantee coverage terms nor that the insurance will pay. Not all services are a covered benefit in all contracts. Some insurance companies select certain services they will not cover.

We will make every attempt to obtain benefits from your insurance company, however, if for some reason your insurance denies payment, you are responsible for the full amount.

3. You must realize your insurance is a contract between you, your employer, and the insurance company. We are not a party to that contract. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are your responsibility from the date the services are rendered.

We realize that temporary financial problems may affect timely payment. If such problems arise, please contact us promptly for assistance in the management of your account.

If you have questions about the above information, please do not hesitate to ask questions. We are here to help you.

Patient

Signature: _____ Date _____

