



FINANCIAL POLICY

In the interest of good healthcare practice, it is desirable to establish a Financial Policy to avoid misunderstanding. Our primary responsibility is to help our patients experience good health and we wish to spend our time and energy to that end.

We are committed to providing you with the best possible care. Our fees reflect our professional commitment to excellence. If you have insurance, we are happy to help you receive your maximum allowable benefits. In order to achieve these goals we need your assistance and your understanding of our payment policy.

For the convenience of our patients we offer the following methods of payment and fees:

- Payment in full by cash, bank card or alternative financing of each appointment as service is rendered, Alternate financing (payment plans) must be arranged before treatment is rendered.
- For insurance patients, we will accept payment directly from the insurance company only for that percentage the company will cover and do require that the deductible and non-covered fees be paid at each visit.
- Bank charge cards- Visa, MasterCard and Debit cards are accepted.

Our office staff understands insurance and will be glad to assist you in obtaining the maximum benefits specified in your contract. It is important that you realize however:

- Your insurance benefit is a contract between you, your employer (if applicable) and the insurance company. We are not a party to that contract. This office files your insurance claim as a courtesy to you. We will bill your PRIMARY and SECONDAY medical insurance plans as long as they are provided at the time treatment begins.
- If your insurance plan requires a referral from your Primary Care Physician, we that you phone your Primary Physician prior to your appointment for the necessary authorization. Lack of referral could result in patient responsibility for services requested on that day.
- Our fees generally, but not necessarily, fall within the usual and customary fee structure determined by your insurance company.



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- Not all services are a covered benefit in all contracts.
- You (not the insurance company) are responsible to us for all fees for services rendered to you.
- Upon request, a pre-determined estimate of benefits can be given to you.
- We will gladly discuss your proposed treatment and answer any questions you might have as to the involvement of your benefit program in receiving this care. We do recommend that you contact your insurance plan to verify your benefits for treatment our Physicians may recommend. We appreciate the opportunity to serve you.
- If you have an unpaid balance greater than 90 days outstanding, we have the option of declining to extend additional credit until balance is paid in full. This would mean no additional medical appointments and treatment.

_____ Date of birth

Patient Name (Please Print)

Signature of Patient or Patient Representative

_____ Date