

Office Policies

Insurance

Our office will file your insurance claim to your insurance company as a courtesy to you. All coinsurance and / or co-pay amounts are due before each visit. We accepts payment by cash, check, Visa, MasterCard, Discover and American Express. Any non-covered services or any amounts not paid by your insurance company become your responsibility. Your account with our office is your responsibility, not your insurance company's responsibility. All insurance co-payments and / or coinsurance paid are estimates and are subject to change due to insurance payments. If you are not on one of our participating insurance plans or you have no insurance, we reserve the right to charge you prior to your visit.

Referrals

It is ultimately the responsibility of the patient to make sure a referral is obtained before services are provided. With most insurance companies, it is almost impossible to get referrals after services have been rendered.

Missed Appointments

Our office reserves the right to charge a fee, not to exceed \$25.00, for appointments that are cancelled on the same same day or appointments that the patient does not keep. Upon three same day cancellations or no shows we will refer you out of our practice.

Returned Checks

There is a \$25.00 service for all checks returned by your banking institution. Returned check fees as well as the amount of the check are payable by cash, money order, or credit card.

Delinquent Account

Our office reserves the right to refer any amount that is not paid in full after 90 days to our collection agency. The patient will be held responsible for all charges incurred through this process. Our office will not schedule any appointments until all balances are paid in full.

Our office tries to see our patients in a timely manner. We would appreciate you being on time for your appointment. If this is not possible, please give us a call. Thank you.

Patient's Name: _____

Patient's Signature: _____

Date: _____