

OFFICE POLICIES

Billing

We accept most insurance plans and will gladly file insurance claims on your behalf. Ultimately you hold the financial responsibility for your account. We ask that you remit any applicable co-pay, deductible, and co-insurance according to the terms of your insurance contract at the time services are rendered. If you do not have your insurance information available at the time of your visit, we require that you pay 100% of charges rendered prior to the visit.

If you are unable to make payment in full, please inquire about arranging a payment plan. If multiple attempts to collect payment from you are unsuccessful, we reserve the right to turn the outstanding balance due to over to a collection agency. In addition to the principle balance due, you will also be responsible for any legal or collection agency fees incurred.

Cancellations

We will attempt to contact you to remind you of your appointment 24 hours prior to your appointment. If you are unable to keep your appointment, we require a 48 hour notice of cancellation. If you fail to show for your appointment or cancel without notifying us 24 hours in advance, we reserve the right to charge you a \$40.00 no show fee. Fees for procedures/surgery may vary.

If you are 15 minutes late to your appointment, you may be asked to reschedule and you may incur a fee.

Prescription Refills

We request 72 hours to refill prescriptions from time of request. The best way to request refills is to call your pharmacy two (2) weeks before your medication runs out.

Referrals/Prior Authorizations

Please call your insurance to verify if a referral/prior authorization is needed. Some insurance companies do not require a referral. Please allow at least 72 hours to obtain your referral. Some insurance's can take up to 7 business days to receive approval or denial. We cannot back date referrals and we cannot accommodate same day referrals unless it is a true emergency.

Forms/Medical Records

Forms needing to be filled out by a provider (i.e. school physical form, disability paperwork) are subject to a \$10-\$50 form fee which cannot be billed to your insurance company. Please allow us 72 hours for the forms to be completed. There will be a \$10 fee for lost orders/referrals.

After Hours Care

You can reach the on call physician by calling our main office number. The on call physician will advise you where to go based on your medical condition.

Emergencies

If you have a life-threating emergency, p	lease call 911 or go to your near	est emergency room.
By signing this form, I have agreed to the	e terms and conditions listed abo	ove.
Printed Patient Name	Date of Birth	Today's Date
Patient Signature	_	
Printed Name of Personal Representative	Relationship to Patient	Signature of Personal Representative