

FINANCIAL POLICY

We are committed to providing you with the best possible care. If you have medical insurance, we are willing to help you receive your maximum benefit. In order to achieve these goals, we need your assistance and understanding of our payment policy.

While we do file insurance claims as a courtesy to our patients, all charges are your responsibility from the date the service is rendered. We also realize that temporary financial problems may affect timely payment of your account. If such problems arise, we expect you to contact us promptly for assistance in the continuing management of your account.

We gladly accept Visa, MasterCard, American Express, Discover and Care Credit.

- Payment for co pays are due at the time of service. If you have no insurance, the balance, in full, is expected at the time of your appointment. If you state you are unable to pay at time of service, you will have to reschedule your appointment.
- You will be charged \$55.00 for each missed appointment not cancelled by 4:30 PM the day before which will not be submitted to your insurance.
- Medical Record copying fee is \$.50 per page Flat Rate. The first 10 pages will be free of charge. This fee applies to records released to another facility and/or patient.

Signature

Date

Print Name

Birth Date