

FINANCIAL POLICY

We are committed to providing you with the best possible care. If you have medical insurance, we are anxious 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.

Medicare law mandates that the physician rendering service must submit your claims. If you have insurance coverage in addition to or other than Medicare, it is your responsibility to see to it that your secondary insurance is submitted to your secondary insurance. We will gladly discuss your proposed treatment and answer any questions relating to your insurance. You must realize, however, that:

1. Your insurance is a contract between you, your employer and the insurance company. We are not a party to that contract.
2. Our fees are generally considered to fall within the acceptable range by most companies, and therefore are covered up to the maximum allowance determined by each carrier. This applies only to companies who pay a percentage (such as 50% or 80%) of "U.C.R." is defined as usual, customary and reasonable by most companies. This statement does not apply to companies who reimburse based on an arbitrary "schedule" of fees, which bears no relationship to the current standard and cost of care in this area.

We must emphasize that as medical care providers our relationship is with you, not insurance company. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are your responsibility from the date services are rendered.

If you have any questions about the above information or any uncertainty regarding insurance coverage, please do not hesitate to ask us. We are here to help you.

I assume financial responsibility for care given whether or not an insurance company is involved.

SIGNATURE _____ DATE _____

FOR PATIENTS THE MAY NOT HAVE HEALTH INSURANCE COVERAGE

In the event that you do not have health insurance; health insurance that covers Chiropractic care; a high deductible; or your benefits have maxed out per your insurance contract, then you may qualify for our TOS (Time of Service) Fee Plan. Please ask to speak with the Billing Department Representative for information regarding this.

Insurance

TOS Plan

Medicare