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## **OFFICE FINANCIAL POLICY**

### **CASH**

1. All patients are on a cash (cash, check, or credit card) basis unless other applicable coverage stated in section of "OTHER COVERAGE" is applicable.
2. First day services are to be paid in full unless arrangements have been made prior to services rendered.
3. This office may make payment plan arrangements on an individual basis. Any such plan or arrangements will be discussed during your second report of findings.

### **OTHER COVERAGE**

1. We accept assignment for Workers Compensation.
2. We accept assignment for Personal Injury.
3. We accept assignment for BlueCross BlueShield, Humana Choice Care, PCHS and CHA. For other Insurance Carriers, we do file this as a service to you.
4. We accept assignment for Medicare (for Medicare covered services) and Medicaid.
5. You are responsible for your entire bill regardless of your insurance company's failure to pay any of the anticipated charges for any reason.
6. Any services not covered by your insurances will be the patient's responsibility.
7. Any denied or disputed claims will be treated as uncovered services and you will be expected to pay such charges on a timely basis.
8. If the patient is referred to another specialist or discontinues care for any reason other than discharge by the doctor, the bill is due and payable in full immediately; regardless of any previous arrangements or discounts.
9. If you have any questions concerning this or any other matter, please speak with the receptionist prior to seeing the doctor.

Thank you,

I have read and understand the Financial Office Policy and agree to abide by these terms.

\_\_\_\_\_  
Patient's Signature

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Date