

FINANCIAL POLICY

BASIC POLICY: Payment for services rendered is due in full at the time of service. Our office accepts cash, personal checks, Care Credit, Visa, MasterCard, American Express and Discover, as well as direct debit bank cards.

FOR PATIENTS WITH INSURANCE: As a service to our patients we will bill your insurance carrier, provided we are furnished with your complete policy information. Every effort will be made to closely estimate your co-payments and deductibles, which are due at the time of service; but the ultimate responsibility for any unpaid balance rests on you. Please understand that insurance is a contract between you and your insurance company. If an insurance company has not paid within 60 days, any unpaid balance is due and payable in full from you. We are always available to help you research any unpaid claims.

ALTERNATIVE FINANCING SOURCES: For patients that are interested in financing a payment plan, we are able to provide an application for approval with Care Credit. Feel free to ask our billing personnel for further information.

MEDICARE: We are not a Medicare provider therefore Medicare will not pay any claims submitted by our office. In addition, we do not participate with Medicaid or AHCCCS.

CANCELLATION OF APPOINTMENTS: We ask that you provide at least a 24 hour notice when canceling an appointment. This allows us ample opportunity to provide a patient in need of care with the doctor's available appointment time. Cancellations without at least a 24 hour notice are subject to a \$20.00 charge.

REFUND POLICY: In the event that you have a credit balance of \$75 or more on your account, a refund will be issued in a timely manner. If credit balance is less than \$75, you may request a refund and one will be issued.

I have read, understand, and agree to the above financial policy regarding payment of professional fees. I understand that I am ultimately responsible for all fees for professional services rendered to me.

Name: _____ Date: _____

Signature: _____