

Financial Policy – Medical Provider’s Contract: Summerville Chiropractic

The established financial policy of this office is that payment is due at the time of service. We accept assignment of benefits on most major insurance policies.

**** Please understand that we are here to serve YOU, not your insurance company! **
** Talk to us if there is a money concern ****

Medicare:

While we are not a participating provider of Medicare services, Medicare will pay for 25 Chiropractic adjustments in a 365 day cycle. Thus we will accept assignment for that period (whichever comes first). You are responsible for the Medicare co-payment on each visit. We will file claims to Medicare every 2 weeks. They will not cover the cost of examinations or x-rays, although these services are required in order for Medicare to cover the cost of your adjustments. You will be responsible for the cost of exams and x-rays. If Medicare ceases to cover your Chiropractic care, we will set up an affordable monthly payment agreement with you.

Patients without Insurance:

It is **required** that you pay at the time of service on your first visit. In certain situations, we will set up a weekly or monthly payment plan for future services. Please speak with the office staff if you need this. We will work with you.

Patients with Insurance:

Regardless of whether or not you have met your deductible for the year, payment **must** be made for your initial visit. On your second visit, after we have verified your insurance policy coverage, we will speak to you regarding any credit balance you may have with us. Please remember Health Insurance policies are contracts between patients and their insurance companies. If you have qualifying insurance and sign our “Assignment of Benefits” form, we will prepare and file your claims and wait for up to 60 days for insurers to pay their portion of your claim(s). Under this arrangement, you must pay your deductible, co-pay, and any non-covered portion on **each visit**, or on a scheduled payment plan if you prefer.

Our charges are within the range considered “Usual & Customary” by most insurance carriers, however we cannot warrant or guarantee that your insurance will pay. Any services not covered, or coverage reductions by your insurance will be *your responsibility*. If coverage problems arise, you will be expected to deal with your insurance company, adjustor, or agent directly. Any denied or disputed claims will be treated as uncovered services and you will be expected to pay such charges on a timely basis.

- All insurance payments received are applied to your account as long as any balance is due.
- Refunds are made only after your balance is completely satisfied with this office.
- If you receive any correspondence or checks from your insurance company, you must bring these into our office so that we may determine if any action needs to be taken.
- If you change insurance companies or employers, or choose to discontinue your insurance coverage you must provide this office with current information.

To ALL Patients:

You, the patient, are responsible for all collection fees, attorney fees, court costs, and interest on any balance over 60 days past due.

This office accepts Visa, Mastercard, Discover, Debit cards, cash, and personal checks as payment for services. A service charge of \$ 15.00 will be assessed on all returned checks.

If you have any questions regarding this or any other matters, please speak with any office personnel.

I have read, understand, and agree to the above financial policy.

Patient signature

Date