



Financial Notice

Due to constant changes in insurance coverages, it is no longer an easy job to interpret each individual policy. Although we try to stay aware of the changes in our patients' policies, it is not always possible. It is YOUR responsibility to know your individual coverage.

Please do not be angry with us if your insurance does not cover all your services. All insurance policies have exclusions, and most policies have deductibles, co-pays and/or co-insurance. Please remember that your insurance policy is an agreement between you, your employer, and the insurance company. It is not between the insurance company and this office or the doctor.

As a courtesy, our office will attempt to pre-verify your primary insurance coverage for your chiropractic care. We must emphasize that as providers, our relationship is with you, not your insurance company. Please be advised that the information provided by your insurance company is not a guarantee of payment, only an estimate of what might be covered under your policy at the time of inquiry.

By signing below, you confirm you understand that:

- It is your responsibility to inform us of any changes in your insurance policy so that your coverage can be reverified.
- Not all services are covered with all insurance plans.
- It is your responsibility to be aware of what service(s) is being provided to you and if it is a covered benefit under your insurance.
- You are responsible for any non-covered charges not payable by your insurance company.
- We will send all required claim forms and documentation to ensure your claims are processed in a timely manner. The final determination of benefits available is determined when the claim is sent to your insurance company, and we receive an explanation of benefits from them.
- After all co-pays, contracted plan reductions and insurance payment credits are applied to your account, any remaining portion will be your responsibility. If you are a MEDICARE patient, please be advised that Medicare only covers *acute* spinal adjustments in a chiropractor's office. All services outside of the spinal adjustment in our office will be your financial responsibility.

We realize that temporary financial problems may affect timely payment on your account. If such problems do arise, we urge you to contact us promptly for assistance in the management of your account. If you have questions about the above information, please do not hesitate to ask us.

We are here to help you.

Patient Name

Patient (or guardian/representative's) Signature

Date