

## OFFICE POLICY REGARDING INSURANCE ASSIGNMENT

Our office will accept your insurance on assignment. However, it must be fully understood that your insurance policy is a contract between you and your insurance company. Our office will not enter into a dispute with you insurance company over policy limitations or issues. This is your responsibility and obligation. **All charges incurred are your responsibility.** Our office will file your claims for you and assist you in every way possible to ensure benefit recovery.

### **Please read the following office policy regarding assignments:**

1. At the beginning of your treatment our office will make every attempt to verify your policy benefits, however, this office DOES NOT guarantee you insurance policy or payments.
2. Your insurance will be filed as a courtesy to you. We file insurance claims on a weekly basis.
3. You are required to sign an "Assignment of Benefits" form and any other forms required by your insurance company on your first visit.
4. If your insurance company requires their own claim form(s), you are required to bring in the completed form(s) by your second visit and then as needed.
5. You will be responsible for your deductible and co-payment. If your insurance company does not pay something that was anticipated, you will be responsible for the amount as soon as we/you are aware of the denial.
6. Your insurance should pay within 60 days from the date in which it was filed.
7. By taking your insurance on assignment, our office agrees to wait for a portion of you bill for an estimated amount of time. In the event that your insurance company does not pay on a timely basis, you may be asked to pay.
8. If your insurance company mails a check directly to you for our services, you must bring the misdirected check to our office within 48 hours.
9. Any overpayments made by your insurance company which credits your account will be refunded to them. However, any overpayments or errors in amounts paid which does not credit your account will be your responsibility.
10. If you discontinue care without the doctor's authorization, the balance on your account is due and payable immediately, even if your insurance has been filed. (If your insurance does pay, after your account has been paid, refunds will be sent to you.)

I have read and understand the policy regarding insurance assignments. I realize that I am responsible for all charges incurred by me at this office.

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Signature

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Date