

FINANCIAL POLICY

Chiropractic care is covered under many insurance plans. Most of our patients that have health or accident insurance will fall under one of the plans discussed in this policy. We ask that you read and understand our policy as it applies to your particular situation.

PATIENTS WITHOUT INSURANCE

We request that 100 % of the first visit be paid at the time of the visit. On other visits, payment arrangements may be made if you sign a payment agreement. We are happy to accept your check, MasterCard, Visa, American Express or Discover. You, the patient, are fully responsible for any charges incurred in this office.

GROUP OR INDIVIDUAL INSURANCE

When possible, we will call to verify benefits on your insurance. However, the benefits quoted to us by your insurance company are not a guarantee of payment. Payment will be due by you at the time of service for any non-covered services, deductibles or co-pays. However, Back and Neck Pain Center, depending on the coverage, may or may not accept your insurance on assignment.

“ON THE JOB” INJURY (Workers’ Compensation)

If you are injured on the job, your care should be paid for under your employer’s Workers’ Compensation insurance as long as Dr. McKay is on the “panel of physicians” at your place of employment or you have written permission from your employer for you to receive treatment at Back and Neck Pain Center. You will need to inform your employer of the accident and obtain the name and address of the carrier of their insurance. If your employer does not provide us with this information, if a settlement has not been made within 3 months, or if you suspend or terminate care, any fees and services are due immediately by you.

PERSONAL INJURY OR AUTOMOBILE ACCIDENTS

Please notify your auto insurance carrier of your visit to our office immediately. If you have medical payments on your auto insurance, you should also fill out an application for benefits so that Back and Neck Pain Center may be paid in a timely manner. Your health insurance will be filed if you do not have medical payments or if they have been exhausted.

MEDICARE

We do not accept assignment from Medicare. You are responsible for your bill at the time of service. The check will be sent directly to you for reimbursement of the services that Medicare will cover which for Chiropractors is ONLY manual manipulation of the spine. Our office completes and files the forms for Medicare at no charge.

SECONDARY INSURANCE

Please inform us of any secondary insurance you may have so this can be filed also. However, we require you still pay your percentage; you will be reimbursed for any overpayment on your account.

MANAGED CARE PLANS

We will call to verify your benefits. You will be required to pay any deductible and applicable co-payment. You will also be responsible for any non-covered services.

I have read and understand the payment policy of BACK AND NECK PAIN CENTER. I understand that my insurance is an arrangement between myself and my insurance company, NOT between BACK AND NECK PAIN CENTER and my insurance company. I request that BACK AND NECK PAIN CENTER prepare the customary forms so that I may obtain insurance benefits. I also understand that if my insurance does not respond within 60 days, or if I suspend or terminate my schedule of care as prescribed by the doctors at Back and Neck Pain Center that fees will be due and payable immediately. ALL LEGAL AND COLLECTION FEES WILL BE ADDED TO THIS DEBT!

Patient's

Date

Witness