

DEBALZO, ELGUDIN, LEVINE, RISEN LLC: Practice Policies & Information

We are committed to providing you with the highest quality of care possible and if you have medical insurance to helping you receive your maximum allowable benefits. In order accomplish this, we need your assistance including your understanding of our payment policies as well as of your individual insurance plan.

METHODS OF PAYMENT & MONTHLY STATEMENT

Payment in full for service is requested at the time of your visit. If the clinician you are seeing is a provider for your insurance, then co-payments are required at the time of service. For your convenience, we accept cash, checks, VISA, AMX, and MasterCard. Returned checks are subject to a \$37.50 fee. If you have an outstanding balance, you will receive monthly statements until your balance is paid in full. Any reimbursement from your insurance company is credited to your account for your next visit or a refund check will be sent to you. In special cases, individual payment plans may be arranged at the discretion of your clinician.

CREDIT CARD ON FILE

We offer the service of having a credit card on file as a convenient payment method for any charges to your account including those that insurance does not cover. Your credit card information is kept confidential and secure. Please complete the Agreement Form attached if you would like us to provide you with this service.

FILING OF INSURANCE CLAIMS

We will file your insurance claims for you, providing that you complete and sign your Patient Registration Form. While we extend this service as a courtesy, we must emphasize that your insurance is a contract between you and your insurance company. We are not a party to that contract, and all charges are your responsibility. We will make every effort to investigate and to try and solve any problems with your insurance, but expect that you will take the primary role in ensuring that your account balance is paid in full.

OUR RECOMMENDATIONS

We recommend that you educate yourself about the specifics of your insurance policy. To help you understand your coverage with us, we suggest you call your insurer and ask the following questions: Do I have outpatient mental health benefits? May I choose a provider on my own? What are my benefits if I don't choose a "network" provider? What is my deductible? What is my co-payment yearly, and lifetime maximum? Knowing the answers to these questions will help you optimize your benefits and your health care.

REFILLS OF PRESCRIPTION MEDICATION

There is a charge for the refill/authorization of any prescription medication that is not handled during your session with the prescriber.

MISSED APPOINTMENTS

Your appointment is reserved for you only. Should you miss an appointment, or cancel with less than 24 hours notice, you will be charged the clinician's fee for the appointment. Insurance will not reimburse for missed appointments.

We look forward to working with you!

Name (Print): _____

Signature: _____ Date: _____