



Financial Policy

Welcome to the Medical Center for Immune & Toxic Disorders. In order for our medical staff to be able to deliver the quality of care that you are accustomed to, we have established financial policies. The following is a list of guidelines that are necessary in order to continue to provide high quality care and make your visit as pleasant as possible.

PLEASE READ ALL INFORMATION AND ACKNOWLEDGE BY INITIALING AND THEN SIGNING BELOW:

Initials

- _____ 1. If you have a change of address or telephone numbers please notify the receptionist.
- _____ 2. **We do not participate with any insurance company.** Payment is due at the time services are rendered. We accept cash, checks, Visa, MasterCard, Discover and American Express.
- _____ 3. If your account becomes delinquent we reserve the right to refer your account to a collection agency and report it the credit bureau. The patient or guarantor will be responsible for any additional fees incurred as a result of collection placement or legal action.
- _____ 4. **MEDICARE/MEDICAID PATIENTS:** We are not a participating provider with Medicare or Medicaid. We have 'Opted Out' and therefore charges for services provided are not eligible for submission to Medicare or Medicaid for reimbursement. A Waiver **MUST** be completed prior to the rendering of services.
- _____ 5. No show, late cancellations or missed appointments - When an appointment is scheduled with the facility, time is specifically allocated for you. When an appointment is not cancelled in advance, and the patient 'no shows' another patient that needed to be seen may have been unable to because the time slot was already reserved. We understand there *may* be times when you are unable to keep an appointment, but we ask the courtesy of a phone call from you at least two business days prior to the scheduled appointment time to cancel an appointment. If **two** appointments are missed without cancellation or with cancellation less than the required two business day notification, you will be charged a \$200.00 fee. If **three** appointments are missed without prior notification of cancellation, you will be dismissed from the practice for non-compliance.

Remember, you are ultimately financially responsible for payment of your charges. If you have any questions regarding our financial policy, please contact our billing department at (281) 681-8989.

By signing this document, I confirm that I have read and have a full understanding of the financial policy of the Medical Center for Immune & Toxic Disorders and agree to these policies.

Print name

Signature

Date