

# *Abundant Living Chiropractic's* **FINANCIAL POLICY**

Most of our patients fall under one of the plans discussed in this policy. Regardless of your coverage, the doctor will recommend a treatment plan based on the care that is best for you. We ask that you read and understand our financial policy as it applies to your particular situation. We are happy to answer any questions you may have.

## ***IF YOU WILL BE USING HEALTH INSURANCE***

Your insurance is an agreement between you and your insurance company, not between your insurance company and our office. We cannot be certain whether your insurance will cover your care, although most policies do provide Chiropractic coverage. The amount they pay varies from one policy to another. 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. As a courtesy to you, our office will complete and file any necessary insurance forms at no additional charge if we are a provider in your network or if your insurance has out-of-network Chiropractic benefits. **It is to be understood and agreed that any services rendered are charged to you directly and you are personally responsible for payment of any non-covered services, deductibles or co-pays.** If your insurance does not respond within 60 days, all fees will be due and payable immediately by you.

If you receive any correspondence from your insurance carrier pertaining to the care you have received at this office or a request of more information regarding your care, please bring it in as soon as possible. It is very important that we keep your file as current as possible. Occasionally, either by mistake, or due to provisions in your policy, the check issued by the insurance company for payment of services rendered in our office may come to you instead of our office. If you should receive any unexpected check in the mail, please contact us to see if it represents payment of your bill here.

We are preferred providers for Highmark Blue Shield HMO, Indemnity, and PPO plans, Aetna, Capital Blue Cross, and other plans. We also accept Medicare Supplemental and Replacement plans.

## ***IF YOU WILL BE USING MEDICARE***

**Spinal Adjustments:** Medicare will ONLY cover spinal adjustments. Although your spinal adjustments may be clinically appropriate in order to maintain and prevent deterioration of your condition, Medicare will ONLY cover those that it deems "medically necessary". We will inform you when your treatment moves from "medically necessary" to maintenance, wellness, or preventive in nature. At that time, we will discuss treatment and payment plans with you.

Medicare pays 80% of the allowable fee for medically necessary adjustments once your deductible has been met. Medicare will generally not tell us the amount of your deductible that has been met until after we submit the bill for services. Once we receive an EOB detailing the amount you are responsible for as part of your deductible, you will be responsible for paying us directly. You are responsible for your 20% Copay at the time of each service.

**ALL other services:** Other than medically necessary spinal adjustments, **Medicare does NOT cover ANY other service** we provide. These services include, but are not limited to: x-rays, examinations, therapies, orthotics, supports, nutritional supplements, and spinal adjustments that are for prevention, maintenance, or wellness. Medicare patients are fully responsible for charges of all non-covered services, as well as spinal adjustments rendered after Medicare benefits are exhausted. You may be required to sign a special form acknowledging your responsibility for some of these services. In the event there is a clerical oversight where we failed to obtain your signature on such form, you agree by signing this Financial Policy Form that you understand and agree to be responsible for payment of all services Medicare does not cover, less any payments we receive from a Medicare Supplemental Insurance plan.

**Supplemental Insurance Plans:** Medicare Supplemental Insurance plans may pay your 20% Copay, some portion of your deductible, and some services not generally covered by Medicare. We will do our best to confirm your benefits for you. However, in the event your Supplemental Insurance Plan does not cover all or a portion of your charges, you will be responsible for payment.

## ***IF YOU WILL BE USING WORKER'S COMPENSATION***

If you are injured on the job, your care should be paid for under your employer's Worker's Compensation insurance. 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 and must be paid by you.

**IF YOU WILL BE FILING A PERSONAL INJURY OR AUTOMOBILE ACCIDENT CLAIM**

Please present your auto and health insurance cards, and tell us if you have retained an attorney. There are four options available to you. Although you are ultimately responsible for your bill, we will wait for claim settlement for up to two (2) months after your care is completed. Once the claim is settled, or if you suspend or terminate care, all fees for services are due immediately by you.

1. Pay cash for your care and we will submit reports whenever necessary.
2. We will bill (accept assignment) from the Med Pay portion of your auto insurance.
3. We will accept a Letter of Protection or Doctor's Lien from an attorney and await payment at the time of settlement as long as you remain an active patient.
4. We will bill your health insurance plan and you will be responsible for all co-pays and deductibles as they are incurred.

**IF YOU WILL NOT BE USING NO INSURANCE OF ANY KIND**

We require 100% of the first visit to be paid at the time of the visit. On other visits, payment may be made at the time of service or at the end of the week. You may also prepay for your care if you prefer. We are happy to accept cash, debit cards, checks, and Master Card and Visa credit cards. Please see "Flexible Payment Options" below for additional information on making your care more affordable.

**FLEXIBLE PAYMENT OPTIONS**

We are committed to offering you the best Chiropractic care possible, and will recommend the treatment plan that we believe is best for you. Unfortunately, as health care costs continue to rise, some insurance companies are reducing benefits, and raising co-pays, coinsurance, and/or deductibles. Many people are unable to afford health insurance at all. Studies show that Chiropractic care is substantially less expensive for managing back and neck pain than care through a traditional medical provider and medication. Still, in the beginning of your treatment plan, you may be visiting our office 2-3 times per week. In the first months, depending on your health insurance coverage, your out-of-pocket expenses may be more than you had planned for. However, over time your visits will be less frequent, and therefore easier to budget.

We are committed to making your Chiropractic care as affordable for you as possible, as we never want finances to be the reason you discontinue the care you need. If you are not able to pay for your care upfront or on a per-visit basis, please ask us about our monthly payment options that will enable you to spread your payments over time. We do not charge interest on your payments.

**I have read and understand the payment policy of Abundant Living Chiropractic, and agree that I am ultimately responsible for the payment of all charges associated with my care. I also understand that if I suspend or terminate my schedule of care as prescribed by the doctors at Abundant Living Chiropractic, that all fees accumulated to that point will be due and payable immediately by me.**

\_\_\_\_\_  
Patient's signature (or guardian if patient is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

**SPECIAL PAYMENT INSTRUCTIONS: Patient's Name: \_\_\_\_\_**

We have verified your benefits and while your insurance company did not guarantee payment, they stated that you have a \$\_\_\_\_\_ deductible, \$\_\_\_\_\_ of which has been met. Your co-pays are: \$\_\_\_\_\_ for adjustments and \$\_\_\_\_\_ for therapy. You are allowed \_\_\_\_\_ adjustments and \_\_\_\_\_ therapy treatments per year. Your coinsurance is \_\_\_\_\_% of exam charges, \_\_\_\_\_% of x-ray charges, \_\_\_\_\_% of adjustment charges, and \_\_\_\_\_% of therapy charges. Any charges not covered by insurance will be your responsibility.