



### **NO SHOW AND LATE POLICY**

Please show consideration by notifying our office at least 24-hours in advance, if you are unable to keep an appointment. We would like to have the opportunity to offer that appointment time to another patient who needs to see the doctor. If you fail to notify our office at least 24-hours in advance, you will be charged a **\$25.00** administrative fee for office visits and **\$100** for procedures.

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### **FORMS**

FMLA & Disability Forms (Pregnancy and Surgery):

- A **\$25.00** administrative fee will be charged and collected at time of completion.

Other Forms (Biometric, Adoption, Etc.):

- A **\$15.00** administrative fee will be charged and collected at time of completion.

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### **PRESCRIPTION REFILLS**

A **\$25.00** administrative fee will be charged to the patient for prescription refills only if approved by the doctor without an office visit. This includes prescriptions called-in after hours.

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### **MEDICAL RECORDS**

If requested, we will provide you with a copy of your medical records upon the completion of Records Release Form. The fees for these records will be **\$25.00** for the first 20 pages plus **\$0.50** for each page thereafter. You will also be responsible for any costs of shipping or mailing if records are sent to you.

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### **PATIENT FINANCIAL RESPONSIBILITY**

You are financially responsible for the payment of your treatment and care. As a courtesy to you, we will bill our contracted insurers. However, you are required to provide us with correct and up-to-date insurance information and will be responsible for any charges incurred if the information provided is incorrect. You are responsible for any co-pays, co-insurance, deductibles and all other procedures or treatment that may not be covered by your insurance plan. Payment is due at time of service and for your convenience we accept cash, check and all major credit cards.

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Print Name: \_\_\_\_\_