South West Health Spine & Sport
Financial Agreement

At South West Health Spine & Sport, we want you to fully understand what your financial requirements are. If you have any questions about your account, please ask to speak to our billing department.

As a courtesy, we will bill your PPO insurance company for your healthcare services. We are currently contracted with Blue Shield of California until December 31st, 2019 and are out-of-network with all other insurances. There's a possibility that you have out of network benefits to cover the service. Please contact our billing department for details. We ARE NOT contracted with Medicare. We DO NOT bill for massage therapy as insurance carriers do not reimburse for those codes any longer.

If we are not included in your insurance coverage, cannot verify coverage, or you do not have insurance, payment in full is expected at the time of service. We offer a time of service discount off of our regular fees. Please inquire with the front desk for details. For your convenience we accept all credit cards, HSA debit cards, personal checks and cash. If you have a financial hardship, special arrangements for a payment plan may be made with our billing department. We do require a payment each month on your account until the balance is paid.

We collect co-payment and any deductible due at the time of visit. If your insurance company denies payment for a service, we will bill you for the balance due. Any amount not paid by your insurance company within 30 days may be billed to you for payment.

For patients involved in a third-party auto accident claim in which there is no med-pay policy or health insurance, payment in full is expected at the time of service or you have the option of retaining a personal injury attorney that we approve of.

Our staff reviews and updates insurance information on a regular basis as insurance plans and benefits change often and we want to make sure that your coverage information in accurate.

Cancellation Policy:

At South West Health Spine & Sport, we take your time very seriously in that we schedule appointments with the expectation that you will be seen by the doctor at your scheduled appointment time. We request you be present for your appointment on a timely basis. In the event that we do not receive **24 hours notice** of your intent to change your appointment time, a cancellation fee will be imposed as follows. Please note, Monday appointments require 48 hours cancellation notice as our office is closed on Sundays. **I am aware there is a fee of $50.00 for missed or late cancelled chiropractic or acupuncture appointments and a fee of $30.00 per 1/2 hour for late cancellations or missed massage appointments.**

I, _____, have read and understand the South West Health Spine & Sport Financial Agreement. I understand that I am ultimately responsible for all charges to my account.

Patient Signature: _____ Date: _____