

## Important Insurance Information

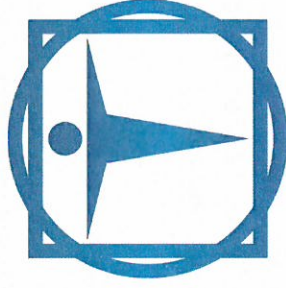
Most insurance policies do cover chiropractic care. However, if yours does not we encourage you to urge your employer or health insurance broker to change your policy to one that does. Your freedom to choose your own health care provider is a fundamental right. If we can help in any way please let us know. Sound Chiropractic Center has patient payment plans for those without health insurance.

It is important that you understand that health and accident insurance policies are an arrangement between an insurance carrier and you, the patient, their insured. Of course, Sound Chiropractic Center will prepare any necessary reports and forms to assist you in making collection from your insurance company. Furthermore, any amount authorized to be paid directly to Sound Chiropractic Center will be credited to your account on receipt.

**However, you must clearly understand and agree that all services rendered to you are charged directly to you and that you are personally responsible for payment. In order to facilitate the correct and rapid processing of your insurance claim we suggest you do the following**

1. Call your insurance agent to determine exactly what coverage you have. Ask what deductible, if any, applies to your policy. Then ask how much of your claim your insurance company will pay.
2. Obtain insurance claim forms, if needed, from your agent or insurance company, fill in the required personal information and bring them to our office. Be sure to write down all information concerning any injury (auto, work related, slipping, etc.).
3. When you bring your insurance forms to our office, please ask one of our staff to double check them. This will help avoid unnecessary errors and give you a chance to ask any questions that you may have regarding your claim.
4. If your policy has a deductible feature, then we suggest you pay this amount at the outset of your care. We also require that you keep your account current on at least a monthly basis. Any reimbursement from payments received from your insurance company will promptly be credited to your account.
5. Some of today's insurance policies don't provide the type of coverage that you may desire and larger patient payments will be required. If this is a hardship, ask your doctor about the Sound Chiropractic Center patient payment plan. This will allow you to get the help that you need and pay for it at your own pace.
6. If you are an auto accident or on the job injury victim, we suggest you discuss your coverage with our insurance office. We may well have suggestions that will help you in this regard.
7. You will be asked to authorize Sound Chiropractic Center to furnish information regarding your case directly to your insurance company and to assign all benefits as a result of the claim. This will expedite its handling.
8. It's a good idea to know your own insurance coverage. However, if you have questions, feel free to ask. Our staff is experienced in insurance claims handling and will be glad to help in any way they can.

# Sound Chiropractic Center Office Policy



**SOUND  
CHIROPRACTIC  
CENTER of Seattle**

## A Sound Health Decision

## Sound Chiropractic Center

The following is an explanation of our clinic policies. We believe that a clear definition will allow us both to concentrate on the most important issue: regaining and maintaining your health. We will be happy to answer any questions you may have regarding our policies, your account or insurance coverage.

### No Charge Consultation

Sound Chiropractic Center will do a special "no charge" consultation, or brief conference, with anyone interested in finding out if chiropractic can help them with their individual health problem. There is no charge or obligation in connection with this appointment.

### Patient Payment Policy

We feel the patient's health needs are paramount; therefore the following payment policy is an attempt to allow you, the patient, to receive the care you need and clear your balance with the least amount of difficulty.

### New Patient Care Services

We require 25% of the first visit charges due on the first day of service. The balance of these charges may be made in payments over the next six weeks, unless we bill your insurance for payment. Properly documented Worker's Compensation and auto accident claims are not required to pay at this time if appropriate forms and liens are signed.

### Established Patient Care Services

Patients under care are required to make regular payments on all unpaid balances, except for properly documented Worker's Compensation or auto injury claims. Payments need to be paid monthly or semi-monthly, depending on your arrangements. We do charge one percent interest on all account balances over 60 days.

You will receive a monthly statement with all of your charges itemized. Please review these and retain them for your records (taxes, etc.). We do charge for additional itemizations and the billing of additional carriers.

## Our Policy On Health Insurance

Today most insurance policies do cover chiropractic care. We will be happy to file your primary insurance claim for you and do everything we can to assure you receive proper reimbursement; however, we cannot take responsibility for what your health insurance will or will not cover.

### Appointments

In order to better serve our patients we ask that you call if you are unable to make your appointment or if you will be late. Your appointment time is reserved for you. If you fail to notify our office, it leaves a time slot open that could be used to help someone else. Please help us help others.

### Emergency Or After Hours Calls

In case of an emergency you may contact the office for a special appointment any time during regular office hours. If you, a friend or family member requires after hours or weekend assistance, you may call the clinic at (307) 632-1500 for special assistance.

### Questions And Answers

Your questions about any aspect of your care or account are invited. Please feel free to ask your doctor or any available staff member. We will make every effort to answer your inquiries.

I have read the Sound Chiropractic Center Policies and will honor them:

\_\_\_\_\_  
Patient's Signature

\_\_\_\_\_  
Date