Financial Policy Agreement

Please read and sign. Ask us about anything that is unclear — we are happy to explain.

I will bring my child's current insurance card to every visit and tell the office when insurance changes.

- Copays are due at the time of the visit. A $15 service fee applies if a copay is not paid at the visit.
- After my insurance processes a claim, I am responsible for any amount my plan says I owe (deductible, coinsurance, or non-covered services).
- Missed visits without 24-hour notice may result in a $25 fee.
- Forms completed between visits: $10 for up to 2 pages, $5 per extra page; letters from $25; up to 1 week turnaround. Forms brought to a visit are completed free at that visit.
- None of the fees above apply to children covered by Medical Assistance (Medicaid). Medical Assistance families owe nothing out of pocket for covered care.
- The parent or guardian who brings the child to a visit is responsible for payment at that visit, regardless of any custody or divorce agreement.
- If I have trouble paying, I will call the office to set up a payment plan.

Parent/Guardian signature _____

Printed name: _____

Date: _____