

Touch Stone Rehabilitation & Health Center

318 Sequine Avenue

Staten Island, N.Y. 10309

Telephone (718)356-9222 Fax (718)605-4729

Insurance Financial Agreement

Our Office does direct billing. It is our desire to assist our patients whenever possible. The following insurance assignment program allows you, our patient; to receive the care you will need without undue financial strain.

- 1) Waiting for insurance payment is a courtesy provided by this office. We reserve the right to withdraw this courtesy at any time. We will bill your insurance company and accept Assignment of Benefits during your corrective care and a supportive healthcare program is recommended. We will notify you of the change.
- 2) If you receive payment from your insurance carrier during the period, which our office has been assigned payment of benefits, you are to bring the check into this office within one week of receipt and endorse it over to the office along with the explanation of payment. Failure to do so will result in collection/credit bureau action. In the event that collection proceedings become necessary; patient agrees to be responsible for all reasonable costs of attorney fees as a result of this action.
- 3) All co-pays must be paid at time of visit. We accept cash or check.
- 4) There will be a twenty-five dollar (\$25.00) charge for any returned/bounced checks.
- 5) If a 24-hour notice is not given prior to canceling appointments our office reserves the right to charge you for the canceled/missed appointment.
- 6) If you discontinue care for any reason other than discharge by the doctor, you will be responsible for any unpaid balance regardless of any claim submitted to your insurance company. Also our office will not release any information to parties including attorneys until balance has been satisfied. A letter of protection/lien is not considered payment.
- 7) This office cannot promise that an insurance company will pay. In the event that the insurance company disputes or rejects the claim, it will be your responsibility to pay the charges and pursue reimbursement from the insurance company.
- 8) Not filing proper documentation/release forms with an auto carrier and/or employer makes the balance subject to financial charge and personal responsibility. Our office only does direct billing when insurance is available in automobile accidents and workers compensation accidents. This includes when in cases where the patient has an attorney. Also in personal injury cases, this contract overrides any power of attorney for payment to the attorney for subsequent dates.

I have read the above provisions and wish to participate in the insurance assignment program. I hereby agree to abide by the provisions of this program as specified above.

Signature

Date