

## Welcome to Roselle Center for Healing

The Doctors and Staff are very pleased that you have chosen us for your health care needs. The following is a list of our procedures and office policies that will help you get acquainted with us. If you have any questions, please speak to one of our staff members.

1. Always sign in at the front desk.
2. All patients are **required to attend a Health Care Class**. Please make sure you register at the front desk before your third appointment. **Initials:** \_\_\_\_\_
3. **There is a charge for missed appointments**. You will be charged for cancellations and reschedules if you fail to call us at least 8 hours prior to your appointment. **Initials:** \_\_\_\_\_
4. If for some reason you must reschedule an appointment, that appointment **must be made-up within a 7 day period** so that your program of care will not be interrupted. **Initials:** \_\_\_\_\_
5. **Payment is expected in full at time of visit**. We do offer pre-payment schedules at a discount, if you would like to prepay your care. We also have other financial arrangements available. If you want more information, please talk with our receptionist or office manager. **Initials:** \_\_\_\_\_
6. We submit insurance in our office as a courtesy. We accept assignment on a Pre-Approved basis. However, you are responsible for any non-covered services. Please keep in mind that insurance companies all cover differently. Do not assume that your claim will be paid at 100, 80 or even 70 percent. We truly do not know what they will pay until we receive the first Explanation of Benefits (EOB) back from the carrier.
7. If you become an insurance patient in our office, you must first meet your deductible and then keep your co-payment current. **Personal balances can not exceed \$100.00 at any time.**  
**Initials:** \_\_\_\_\_
8. If a problem arises and the insurance company does not pay within 60 days of submission, it will be your responsibility to contact your insurance company and find out what is holding things up. We give insurance companies approximately 90 days to pay before we transfer the balance to you.
9. All outstanding balances 90 days or older will incur a 9.5% interest charge.
10. If you decide to discontinue care on your own, the balance on your account is due and payable in full immediately.
11. We are here to serve you. Please speak with your Doctor or the Office Manager about any upsetting matter, ie., long waits, staff insensitivity, confusion about treatment, etc. We see your comments as a way of helping us help you better.

Patient's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I have read and understand the above information**