



In an effort to serve all of our patients equally, fairly and to the best of our ability, we ask that you review and understand our Patient Policies and Procedures.

Policies and Procedures Agreement

Patient Information and Insurance Cards: Your personal information sheet and insurance cards are an important part of your medical record. It is your responsibility to make sure you update this information at each visit to keep your record current. As this may seem inconvenient, it is necessary to keep you insurance and contact information updated to insure you receive proper care.

Late Policy: Every effort is made to keep our physicians schedules on time; therefore if you are more than 15 minutes late, we reschedule your appointment to the next available with a physician in the office; however there is no guarantee that you will be seen immediately or by the originally scheduled physician. If all the physicians' schedules are full you will be asked to reschedule your appointment to a later date.

Missed/Cancelled Appointments, Procedures, or Surgeries: Every effort is made to accommodate our patients request for appointment; therefore it is important that you make every effort to keep your scheduled appointments. Cancellations of less than 24 hours for missed office appointments/no show appointments will be subject to a fee of \$50. Please be advised that chronic missed appointments may result in dismail from our practice.

Fee for the Completion of Forms, Reports, and Letters: This is a non-insurance covered service which requires time from the administrative and nursing staff as well as the doctors; therefore a fee of \$25 will be charged for the completion of forms or the writing of letters. Once the \$25 fee is paid for the first form, each form thereafter will be \$15 per form. ***Forms include all forms, reports, and letters.

Transferring of Records: All patients must sign a release of records form to have their records copied or sent to another provider organization. Copies will be provided to the patient for a \$10 administrative fee plus \$0.50 per page up to 50 pages and \$0.25 thereafter. There is no fee to transfer records directly to another provider or organization.

Payment for Services for Patients with Insurance: According to your health insurance plan you are responsible for paying your co-payment at the time of service. Co-pays that are not paid at the time of service will be billed with an addition \$10 fee. This fee is necessary to cover administrative and supply costs when billing for co-pays. If we participate as providers with your health plan we will bill your insurance company for your visit. If we are not contracted with your insurance company, you are responsible to pay for your visit after the services are rendered. WeCare Medical Associates files your insurance as a courtesy. We ask if your account remains unpaid after 45 days that you contact your insurance company for payment.

Payment for Services for Patients without Insurance: You will be responsible for payment by cash, check, or credit card on the day of service. On bills with extensive procedures and by approval of our billing department and office manager, you may set up a payment plan with our office. (* Returned Checks: There is a \$50 fee for returned checks.)

Permission for access to Pharmacy Data Bases to Obtain Medication History: YES NO (Circle one)

PATIENT SIGNATURE: _____

PRINTED NAME: _____ DATE: _____