

NMNA must emphasize that as medical care providers, our relationship is with you, not your insurance company. It is required that patients who are covered by health insurance provide NMNA with your current insurance ID card. It is also *your* responsibility to inform NMNA of insurance or insurance ID card changes. If correct insurance information has not been provided, the resulting claim will be denied and **you will be responsible for all fees incurred.**

**You are responsible and should be fully aware of your own policy deductibles, eligible benefits and any referrals/authorizations required.** If you are uninsured or do not have your insurance information with you, **payment in full is due at the time of service.** We accept cash, checks, and most major credit cards. **Co-payments are also due at every visit.**

### **RETURNED CHECK POLICY**

Returned checks will automatically be charged to your account along with a \$35.00 processing fee. Please note, all future visits must be paid by cash or credit card.

### **NO SHOW POLICY**

NMNA requires that if your appointment must be cancelled, it must be done no later than 24 hours prior to your appointment. If you fail to arrive for your scheduled appointment you will be charged a fee ranging from \$25-\$300 (depending on the services scheduled) which you will be personally responsible. Patient who repeatedly cancel or fail to show for appointments will be released from the care of NMNA. You will also be charged a NS fee if you cancel your appointment the same day as your appointment.

### **COLLECTION POLICY**

Balances older than 90 days will automatically be sent to collections. At that point, you, as the patient, will not be seen by NMNA providers until your balance has either been paid in full and/or a mutually agreeable payment arrangement has been made with the NMNA billing office. Late and/or collection fees ranging from \$10-\$100 will also be your responsibility. **You will also not be eligible for prescription refills until the collections balance has been paid.**

### **FORMS, RECORDS, AND LETTERS FEES**

NMNA does charge anywhere from \$45.00 - \$90.00 for forms to be filled out and \$65.00 - \$150.00 for special letters that need to be written by the physicians. The fee will be determined by the physician, based on the detail of the form / letter and time to complete the form / letter. All patients are entitled to **ONE** free copy of their medical records. Any additional copies will require a payment of \$25.00. Insurance companies and attorneys are also required to pay the same fees for forms, records, and letters.

I hereby acknowledge that I have read and understand the above policies.

Signature of responsible party: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Patient: \_\_\_\_\_