

# Health Insurance Financial Agreement

Inner Ocean Center for Healing  
210 E. Simpson St.  
Lafayette, CO 80026  
(720) 441-2392

Welcome to our practice! Below you will find detailed information on our policies regarding the use of health insurance for the services received in our office.

## Explanation of Insurance Coverage

Many insurance policies do cover acupuncture care and we will do our best to verify your insurance coverage and will bill your insurance in a timely manner. Insurance policies may vary greatly in terms of deductible and percentage of coverage for acupuncture care. Because of the variance from one insurance policy to another, we require that you, the patient, be personally responsible for the payment of your deductibles, as well as any unpaid balances in this office.

## Payment Arrangements

If your contracted plan requires that you make a co-payment at each visit, we ask that you pay the full co-pay amount at the time of service. If your insurance company pays for a portion of your services in our office, we ask that you pay the "Patient Responsibility" amount listed on your Explanation of Benefits within 30 days of receipt. Beyond 30 days our office will determine your payment to be late and collect 1.5% interest per month until the balance is paid.

## Assignment of Benefits

By signing this form you are authorizing payment of medical benefits to be made directly to this office. If your insurance carrier sends payment to you for services incurred in this office, you agree to send or bring those payments to this office upon receipt. However, if you pay for your visits in full, the assignment will not be reported by this provider and any payment will be sent directly to you.

## Release of Information

By signing this form, you are authorizing this office upon request from your insurance carrier the release of any medical or other information necessary to process the claim.

**I have read and agree to the above.**

\_\_\_\_\_  
Patient Name

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

