

Community Chiropractic, PC
Financial Policy
For patients with traditional Medicare coverage

It is the goal of Community Chiropractic, PC to provide you with the finest quality chiropractic care available. We expect you to have a great experience as a patient in this office. Maintaining a professional relationship with your insurance company, allows for better overall coverage and care. We work hard to make sure that our documentation, billing procedures and communication with your insurance company exceeds expectations.

- ⇒ This office is NOT a participating provider in the Medicare network. This means that our office does not accept assignment (reimbursement) from Medicare. Any reimbursement that there may be will come directly to you from Medicare.
- ⇒ All visits in our office are payable at the time of service.
- ⇒ Medicare does not cover your initial examination (\$80.00) and is not applied to your deductible.
- ⇒ Your deductible is between \$160.00 – \$200.00.
- ⇒ All visits thereafter are \$40.00.
- ⇒ As a courtesy, our office will submit the claims to Medicare. This is done electronically on a daily basis.
- ⇒ When you receive a statement from Medicare, you can send that statement to your secondary insurance company if they cover chiropractic. In many cases Medicare automatically sends that info to your secondary insurance carrier and they reimburse you directly.
- ⇒ Returned checks are charged \$35.00 in addition to amount owed.
- ⇒ A service charge of \$2.50 will be assessed for payments not made at time of visit.
- ⇒ A \$200.00 balance may not be exceeded at anytime or treatment will cease.

If you have any questions or concerns regarding our financial policy, please contact our business office at 315-592-4740.

Patient Signature

Date