

FINANCIAL POLICY

We strive to provide the best service and highest quality materials available. It is important to understand our policies in regard to services, materials and payment thereof to prevent any confusion and provide you with the best service possible.

Services & Materials

- A 50% deposit is required to order all materials, with the balance due at the time materials are received.
- All professional service fees are due at the time service is rendered.
- In the event you are unable to come into the office in person to order materials (for example contact lenses) you may order over the phone with a credit card.
- If you wish to have any materials mailed to you they will be sent UPS Ground a service charge of up to \$15 can be applied. Location Dependant.
- Returned check fee will be \$40

Insurance

• We will make every effort to work with your insurance company to help you receive the maximum benefits you are entitled. A copy of your insurance card is required at the time of your first appointment and anytime thereafter that you change insurance companies. However, it is important to understand that the final responsibility for payment of services and materials belongs to the patient and not their insurance company. The obligation of your insurance is to pay for services within 30 days. It is in your best interest to call them and question any delay.

We can not accept Medicare as a secondary insurance, and we are able to bill primary and secondary insurance only. If you do not know which is your primary insurance you will be responsible for payment.

- Alternative methods of payment will be assessed on an individual basis. We make every effort to reach to an agreed upon method of payment.

I have read the above policy and agree to comply with its provisions. I understand that I am responsible for payment for all services rendered. I authorize the release of any medical or other information necessary to process an insurance claim. I hereby authorize insurance payment directly to Dr. Sergio A. Guzman. I understand and agree that I am responsible for my account and am aware that any unpaid balances are subject to finance charges. I also understand that I am responsible for any legal or collection procedure fees. Collection or procedures fees will be as much or equal to the amount owed to Dr. Sergio A. Guzman. All materials left over 120 days will be treated as abandoned and will be donated to the charity of our choice. All money put down will be forfeited and will not serve as future credit.

4/15

Date _____ Signature _____