

Financial Policy

- Our practice accepts insurance from most major insurance companies. As a courtesy, our practice will review your insurance coverage, estimate your insurance company payment, and file your claim with your insurance carrier.
- Your insurance coverage is a contract between you and your insurance carrier; however we will assist you to maximize your insurance benefits.
- If your insurance does not remit payment within 60 days, the full balance will be due by you.
- If an insurance problem occurs, you will be asked to assist us in contacting your insurance carrier. We feel it is necessary to work together to resolve any insurance problems.
- Returned checks and balances older than 30 days may be subject to additional fees and interest charges of 1.5 percent per month. You will be responsible for any charges incurred due to collections proceedings, attorney's fees or court costs. Charges may also be made for missed appointments and appointments canceled without at least 24 hours advance notice.
- Any money paid to you by your insurance company for services billed and rendered by Colorado HealthQuest or any of its associates shall be paid to Colorado HealthQuest immediately upon receipt. Failure to do so is illegal.
- **You are responsible for any portion of your bill which is denied or not paid by your insurance carrier. This includes, but is not limited to, deductible, coinsurance and copayments.**
- **Your annual deductible is _____.**
- **Your co-pay is due at the time of treatment. Your co-pay is _____ per treatment.**

I authorize payment of medical benefits from my insurance to Colorado HealthQuest, LLC and the release of any medical information relating to all claims for benefits submitted on behalf of myself and/or dependants.

I understand that I am responsible for all charges including those not covered by insurance. I understand my responsibilities as outlined in the Financial Policy.

Signature _____
Patient/Insured Date