



NORTHSHORE INTEGRATIVE HEALTHCARE

Phone: 847-920-4NIH (4644)

www.NorthshoreIntegrativeHealthcare.com

OFFICE AND FINANCIAL POLICY

When scheduling appointments all clients must provide complete and accurate insurance information. You must bring your current insurance card along with a photo ID to your first appointment, current insurance card to each appointment. Northshore Integrative Healthcare is not responsible obtaining authorization for visits. Clients agree to be financially liable for the services.

We look forward to treating your needs. If you have any suggestions or concerns, please do not hesitate to take them directly to a member of our management staff.

To provide the most efficient and reasonable services, it is necessary to have a financial policy stating our requirements for payment of services provided by Northshore Integrative Healthcare. We will file insurance claims for you as a courtesy if we have accurate and complete insurance information. Please note that the balance due is your responsibility if we have not received payment from your insurance company after 30 days, and will bill you directly for the service. If we receive duplicate payment from the insurance company, we will prepare a refund for any overpayment amount and send it to you.

If you have insurance, and we file with your carrier, you are responsible for all co-pays, coinsurance, and their deductibles.

If you are without “active-paying” insurance or are “Self-Pay,” you are responsible for any/all charges for services rendered. Any balances from prior dates of service are to be paid in full at the time of service in addition to the current visit payment.

Appointments must be canceled within 24 hours of their scheduled time. There will be a full charge for all appointments not canceled within 24 hours.

I have read and understand the above office policies.

Print Name

Signature

Witness Signature

Date