

Office Policies

- **Payment:** Payment is expected at the time of service. Please read and sign our financial policy.
- **Insurance:** We are in-network providers for most insurance companies. We will scan a copy of your insurance card and driver's license. It is your responsibility to inform us of any insurance changes.
- **Referrals & Authorizations:** If a referral is required by your insurance carrier, it is your responsibility to obtain the referral prior to your appointment. If no referral exists on file or your referral has not been received, your appointment will be cancelled.
- **Non-Covered Services:** Certain services performed by our office are NOT COVERED by insurance plans. If a service is not covered, it is your financial responsibility.
- **Hearing Aid Consultation:** Consultations are not covered by insurance. You will be responsible for payment at the time of service. Please bring a copy of your recent audiogram, must be less than one year old, to your appointment. A thorough consultation requires this report. If you do not have a copy of your audiogram, your appointment will be rescheduled.
- **Recurring Appointments:** If you have recurring appointments with our office please make sure that you are on our schedule each month. We do not automatically carry over appointments from month to month. Please confirm with the receptionist to ensure future weekly/monthly appointments.
- **Late Arrivals:** In order for our providers to see patients in a timely manner please arrive promptly for your appointment. If you are more than 15 minutes late, our office will cancel your appointment. Tardiness affects your patient care, as well as subsequent patient care. We understand your time is valuable and will do our best to respect it and see you in a timely manner. Occasionally certain situations and emergencies can occur and cause your provider to run late; therefore, please be patient under these rare circumstances.
- **Missed Appointments:** To help us better serve our patients, please do all you can to keep your appointments. As a courtesy, our office will try to call all scheduled patients one day prior to their appointment for confirmation. If you miss two consecutive appointments with our office, without prior notification to cancel (No Show), all future appointments will be removed from the schedule.
- **Medical Records:** Should you need a copy of your medical records, please allow 7-10 business days for completion.

Patient Name: _____
(Please Print)

Date: _____

Signature of patient or responsible party: _____