

STANLEY J WATERS, M.D., Ph.D

PAYMENT POLICY

PAYMENT IS EXPECTED AND APPRECIATED AT THE TIME OF SERVICE UNLESS PRIOR ARRANGEMENTS HAVE BEEN MADE. You will be asked for your copayment and deductible on the day of your visit. As a service to our patients, we will be happy to bill your claims to your insurance company for you. However, it is your responsibility to provide us with a current copy of your insurance card and although we will gladly bill your insurance, please remember that you are ultimately responsible for payment of services rendered.

Balances on your account are due within 90 days from the date of service.

If your account becomes past due and you have not communicated a valid reason for your payment delay, we will take action to recover the amount due.

PRESCRIPTION REFILLS

Due to the nature of our practice, we require **at least 48 hours** prior notice for all prescription refill requests.

SURGERY

It is our goal to offer exceptional service to our patients. In the event that you need surgery we will contact your insurance company and preauthorize the procedure. At that time we will also verify your insurance benefits. **It is our policy that 50% of the patient balance is to be paid prior to the surgical date. The remainder of the balance must be paid within 90 days.** We DO NOT offer payment arrangements through our office. In the event that you cannot abide by our policy, please discuss this with our receptionist as there are alternative payment options.

LIABILITY INJURIES/WORKER'S COMPENSATION

It is the policy of our office to process certain worker's compensation claims. However, we do not accept out of state workers compensation. If your accident is insured under out of state L&I, we are happy to see you but please be advised that payment will be due in full at the time of service.

We do not become involved in the liability process (attorneys, auto, or home owners insurance). For these cases, payment is due at the time of service. If your attorney agrees to pay for the visit, we will need prepayment in order to not collect on that date. We will also accept a written agreement from you attorney that they will issue payment upon receipt of our claim. **We will continue to provide medical care to liability patients, but we will not get involved in the litigation process.**

Please feel free to discuss these policies or any other concerns you have with our office staff. We will do everything possible to help you.

I have read the above policies and agree to abide by them.

Patient or other Responsible Party

Date