

Heidi Peterson, ND



4444 SW Corbett Ave, Portland, OR 97239 • 503-224-2590 \_ 503-224-2592 (fax)

## Payment Policy and Insurance Billing

As a patient service, I bill insurance companies. I make no guarantees about insurance coverage. I recommend that you call your insurance company and confirm that you have Naturopathic Coverage that covers Heidi Peterson, ND. **Full payment of fees or co-payment is expected at the time of service.** If you have not confirmed coverage, I will expect full payment at time of service. I will refund you if your insurance pays me. Please bring your insurance card and we will make a copy for billing purposes. I suggest when you call your insurance company to verify your benefits that you record the date and the name of the person with whom you spoke.

Date: \_\_\_\_\_ Insurance Representative: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Covers Heidi Peterson, ND? \_\_\_\_\_

Preferred Laboratory: \_\_\_\_\_

Coverage Includes: \_\_\_\_\_

Last minute cancellations of scheduled appoints are difficult to fill and costly. Therefore, I ask that cancellation be made at least 48 hours to your appointment. Appointments missed or cancelled in less than 48 hours will incur a 50% charge. Exceptions to this policy may be made for emergency situations on a case by case basis.

\_\_\_\_\_ I have read the payment policy and accept responsibility for payment.

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_