



Pueblo Bone & Joint Clinic, PLLC

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FINANCIAL POLICY

Thank you for choosing The Pueblo Bone and Joint Clinic as your healthcare provider. We are committed to providing the best medical care possible. Please understand that payment of your bill is considered a part of your treatment. The following statement explains our Financial Policy which we ask you to read, sign and return to us prior to your treatment.

- All patients should provide accurate and complete personal and insurance information prior to being seen by the doctor.
- All applicable co-pays, personal balances, both current and prior, are due at time of service.
- We accept cash, check, debit or credit cards, Mastercard, Visa and Discover.

Regarding Insurance

We participate in multiple insurance plans. For some other insurances we accept assignment benefits but in all cases we require that the guarantor, the person who is financially responsible, is *personally* liable for all balances not covered by insurance. It is your responsibility to understand and comply with any predetermination of benefits or referral requirements. Please be aware that some, and perhaps all, of the services provided may be non-covered services or may not be considered medically necessary under the Medicare Program or by other medical insurance companies.

Past Due Accounts

Overdue accounts will be referred to a collection agency. Legal fees that we pay to secure past due balances will be added to your account.

Co-Pays

Payment for co-pays are expected at time of service.

Returned Checks

For checks returned to us as unpaid by your bank, we will charge a \$25.00 fee.

Please contact our Billing Office if you have any questions or concerns at (719) 544-4265 or (719) 543-4664

I have read the Financial Policy. I understand and agree to the Financial Policy.

- You have authorization to charge my credit card for any current or past due personal balances upon receiving my verbal or written permission.

Print Name

Signature

Date