

WELCOME TO OUR OFFICE

Patient Name: _____
You are scheduled for an appointment with Dr. _____
Appointment Date & Time: _____ at _____

Please complete the forms attached and bring them to your appointment along with your **insurance cards**. It is **VERY IMPORTANT** that you complete the enclosed forms before your appointment time. Failure to do so will increase the waiting time for you and other patients. **If this is a first visit for you, please be prepared that your office visit may take up to 1-1/2 to 2 hours to complete x-rays and examination.**

******* BRING ALL X-RAY, MRI, CT SCAN, AND BONE SCAN FILMS AND REPORTS OF THE BODY PART TO BE EXAMINED ***** unless performed at MSU Radiology**

PREVIOUS SURGERY: If you have had previous surgery by another physician for the condition for which you are being seen, please provide us with a copy of the operative report.

INSURANCE: Please check with your insurance prior to your visit to verify coverage, deductibles, and co-pays. Our staff will be happy to answer questions regarding our physicians's participation in the various insurance plans.

AUTHORIZATIONS: If your insurance requires authorization from a primary care physician, it is your responsibility to provide that to our office on the day of your appointment. If you do not have the necessary authorization we may need to **RESCHEDULE** the appointment.

WORKERS COMPENSATION/AUTO/PERSONAL INJURY: If you are being seen for an injury due to work, auto, or a personal injury claim, you must provide written authorization from the insurance company responsible for the payment of claims. The authorization must include: insurance address, claim number, claim's adjustor's name and phone number, date of injury. If you do not have written authorization we will have to **RESCHEDULE** your appointment.

FINANCIAL POLICY: We accept cash, check, Visa, and Mastercard for co-pays, deductibles and non-covered services. Payment is expected at the time of service. Patients with BCBS Master Medical or BCBS with no office visit coverage are expected to pay for office services at the time of service and we will submit a claim to BCBS for you. Anyone who is experiencing financial difficulties should contact our Patient Accounts at 517-884-6248 to arrange for a payment plan.