JASSER CENTER
FOR COMPREHENSIVE CARE

Jasser Center for Comprehensive Care

Thank you for choosing our office for your health care needs. We strive to provide the best services and quality care for you and your family. This guide will assist in helping ensure your services are paid. Please be aware of your insurance coverage remembering that your coverage is a contract between you and your carrier. Our relationship is with you, our valued patient, not with your insurance company.

Please bring the following to each office visit:

- A current insurance card
- Your co-payment. Please note that if you have not met your deductible, we will require payment of $50.00 in addition to your co-payment.
- Any past due balance will be collected upon check-in at the front desk.

We are contracted with the majority of insurance carriers and as a convenience to you we will file claims with those plans accordingly. Eligibility of coverage is based on the information provided on your insurance card and is confirmed at each visit.

Updated Information

Your current contact information is critical for ensuring timely and accurate billing of your insurance claims. We will also use this information to contact you with test results, etc.. We highly encourage all of our patients to utilize the ***Patient Portal***—a secure communications method that will allow you to receive your test results, request an appointment and send a message to your doctors staff. Please keep our office current on any changes in your email address, physical address, cell and home numbers and any insurance updates. You will be asked to review your information and acknowledge that you have provided the most current information prior to each appointment. For more information about the Patient Portal please ask a front desk team member.

Co-Payments & Balances

Your co-payment is always due at the time of service and will be collected prior to being seen by any provider. Failure to pay your co-payment at the time of the service is a violation of your insurance contract. Any past balances are due at each visit. If you have not met your deductible, you will be required to pay and additional $50.00 at the time of service.

Missed Appointment Fees

You will be reminded of your appointment 48 hours prior to your scheduled visit via our automated messaging system. To avoid cancellation fees, please cancel your appointment at least 24 hours prior to your scheduled visit by calling our 24 hour cancellation message line at: (602) 251-3122. Cancellation fees are:

$50 for physician appointments $250 for Nuclear Testing appointments

These fees are not covered by your insurance. If you have any questions, please ask a front desk team member.

Non-Covered Services

It is your responsibility to ensure that tests recommended by your physician are covered by your insurance.

Billing Department

You can reach our billing department directly by calling: **(602) 441-3485 or (602) 374-8595**. Upon receipt of your monthly statement, please review for accuracy and remit any portion that is notated as patient responsibility.

Service Fees

Fees for services are dictated by the insurance contracts and are competitive in our area. It is a violation of our contractual agreement to discount or waive any fees.

Forms

- Allow 5-7 business days for completion of any forms, prior authorization or letters.
- Note that any form to be completed may require office visit.
- At time of submission a fee for page is required. This fee is dependent on number of pages and complexity
- We do not charge for prior authorizations

Payment for Services

For your convenience, we accept the following payment methods:

- Cash
- Check with appropriate identification
- American Express, Visa and MasterCard

If you have any questions or concerns about the information in this packet, please feel free to ask a front desk team member or our Practice Administrator.

Patient Signature _____ Date _____

Patient Name _____