

Payment for Services Agreement

Thank you for choosing Dr. Glenn H. Osterweil, DOM, LAc, DPM as your Acupuncture Physician. Your understanding of our financial policy is an essential element of your care and treatment. We are committed to the success of your treatment. Please understand that payment of your bill is considered part of your treatment and timely payment is imperative in assuring the continuation of the lowest possible cost to you.

1. All professional fees are due at the time that services are rendered, including copays, deductibles, or non-covered insurance amounts. The office accepts cash, check, debit/credit cards as methods of payment for Acupuncture services. Payment is made directly to Dr. Glenn H. Osterweil, D.P.M., L.Ac. for the amount due after services have been rendered. Our policy is that patients do not maintain a personal balance due unless special financial arrangements have been made prior to treatment.
2. There is a service fee of \$25.00 for all returned checks
3. There is a \$25.00 fee for cancellation or broken appointments without prior 24hr notice to the office via telephone or email notification .

Thank you for reading and understanding our Payment for Services Agreement. Please let us know if you have any questions or concerns.

I have read, understand and agree to the Payment for Services Agreement above.

Patient's Signature

Date

Patient's Name(Print)