



Welcome to Heart Spring Health! Please take a moment to review the following policies. We are committed to providing excellent healthcare and helping you on your path to creating vibrant health and sustainable wellbeing!

We require patients to provide a copy of their insurance card and proof of identification at check-in for every visit. An adult or legal guardian must accompany all minors to the office visit. The adult or legal guardian accompanying the minor assumes all financial responsibility for the cost of the minor's visit. We can provide a receipt or proof of services.

INSURANCE BILLING: As a courtesy, Heart Spring Health will bill your primary and secondary insurance on your behalf. It is essential we have complete and accurate information about your insurance carrier. If you are new to the clinic, or if your insurance has changed, please present your new insurance card and photo ID at your visit. If we are not notified in advance that your insurance has changed you may be responsible for the full amount of the service or procedure. If you do not have your insurance card and photo ID with you at the time of your visit, you will be charged the full amount of the visit at the time of service. This charge may be refunded should the proper information be obtained. This policy is in place to protect our patients from fraudulent claims in the event of identity theft.

COPAY POLICY: Heart Spring Health will be following protocols for verifying your insurance coverage. However, it is your responsibility to know what your copay is. If you do not know, please contact your insurance company. You are required by your insurance to remit payment at the time of service. If you do not know what the amount of your copay is, we will charge you \$25, as that is the most common rate. For co-insurance, we will charge \$40. If this ends up being more than your copay, we will be happy to apply the overage to a future visit or, upon your request, issue a refund. In the event that insurance does not cover or partially covers your visit, your full payment will be retained for your provider's services.

PATIENT RESPONSIBILITIES: Insurance information given to Heart Spring Health by your insurance company is **not** a guarantee of payment. This includes information provided about covered treatments, copays, coinsurance, deductibles, and pre-authorizations. Please remember your insurance policy is an agreement between you and the insurance company and it is your responsibility to pay for any balance not paid or covered by insurance. **Any charges that are not covered by the given insurance company will be billed to you.**

INSURANCE BENEFITS: It is your responsibility to read your own policy, know your coverage, and review explanation of benefits statements regarding payments. Below is a list of some procedure codes that **may not** be covered by your insurance, but may be necessary during the normal course of an examination to diagnose, evaluate and give you the care you need.

97140 and 98925: Manual Therapy	97014: Electrical Stimulation
97035: Therapeutic Ultrasound	97810: Initial 15 minutes Acupuncture
97811: Additional 15 minutes Acupuncture	99354, 99355: Prolonged Services
99358: Additional Research Outside of Office Visit	97214: Massage
99417 and G2212: extended time (often outside of visit)	96156: Behavioral health Counseling
99401-99404: Nutritional Counseling or preventative medicine counseling	

****A decline of these treatments must be acknowledged in writing prior to the service being performed.**

CANCELATION/MISSED APPOINTMENT POLICY: If an appointment is canceled within 36 hours of the appointment date, you will be charged a minimum of 50% of the out of pocket rate of the visit. Late cancellation/misled appointment fees *may vary depending upon individual providers*. Please ask your provider about his/her late cancellation and missed appointment fees or ask the front desk staff for further clarification. Please note that providers rely on a full schedule to ensure financial security. It is difficult to fill an open slot when visits are canceled on short notice. If you have missed your appointment due to an emergency, please contact your provider directly to discuss any fees.

CREDIT CARD ON FILE POLICY: HSH has a policy to have a credit card on file for all patients. The credit card processor does a verification to authenticate the card and you may notice a \$1.00 charge on your credit card statement. This fee will be reimbursed within 24 hours. Your card will be used to collect for your copay/coinsurance or time of service payment, and otherwise will not be charged unless you are notified that you have an overdue bill or if you no show/late cancel an appointment in which case we notify patients 7 days before charging a card in case they want to pay in a different format. Charm and BlueFin are PCI compliant and encrypted.