



## Financial Policy

**Patient Name:** \_\_\_\_\_ **MRN:** \_\_\_\_\_ (office use only)

**Authorized Representative:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

Thank you for choosing Chebny Sports Medicine as your physical therapy provider. Please review our financial policy outlined below. If you have any billing questions, please call us at 224-252-2999.

- All co-payments, co-insurances, and deductible amounts are due at the time of service.
- Full payment is due at the time of service for all self-pay services.
- We must have a copy of your current insurance card, otherwise, you will be directly billed.
- Notification of any changes to your insurance policy is required immediately.
- It is your responsibility to verify we are an in-network provider for your insurance plan.
- It is your responsibility to submit any additional information requested from your insurance company or Chebny Sports Medicine to guarantee payment for services rendered.
- If you are here for a workers' compensation claim, additionally, we will need your health insurance information and will only bill that insurance if we do not receive proper documentation and/or payment from your workers' compensation carrier.

By signing this financial policy, you (the patient) or guarantor agree to pay Chebny Sports Medicine LLC for all services or supplies provided to you, including any co-payments, deductibles, co-insurance or other charges. Furthermore, you certify that the information provided by you for purposes of payment is, to the best of your knowledge, complete and accurate. I understand that I am ultimately responsible for payment of all services provided.

**Patient Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Authorized Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note:** To accommodate all of our patients, Chebny Sports Medicine requires a **24-hour notice for cancellation**. Failure to comply may result in a \$40 cancellation/no-show fee.

**Please confirm your understanding of this policy by initialing here:** \_\_\_\_\_