

Horizon Vascular Specialists and Doctors Vascular Laboratory are the premiere vascular team in Montgomery and Frederick Counties and in Laurel. In order to treat you at the highest professional level, we require the following from you, our patient:

Patient Responsibilities

1. Notify us of any changes in your address or insurance information at the time of change.
2. Be familiar with your insurance requirements regarding necessary referrals or prior authorizations.
3. Provide us with copies of any testing done at another office or hospital.
4. All appointments are scheduled in advance. There will be a \$50.00 fee for missed appointments and \$100 for missed procedures. To avoid these fees, please cancel 24 hours in advance for visits and 48 hours for procedures.
5. Co-payments must be paid at the time service is rendered. (Your insurance company requires this.) There is a separate co-payment for an office visit and vascular laboratory testing.
6. The fee for returned checks is \$35.00.
7. The fee for completing any disability, life insurance or health policy form is \$15.00. Payment is due when the form is given to us to complete. Please allow 14 days to complete the form.

Please be aware that these policies affect all patients and our staff is not able to waive these fees at any time. The fees are not billable to insurance companies.

I have read and understand the above policies.

Patient's
Signature _____ Date _____

5/2010