

Self Pay Financial Policy
****THIS FORM MUST BE SIGNED IN ORDER TO
RECEIVE A SELF PAY DISCOUNT****

If you are seeing one of the **Northwest Health Care Associates Physicians** and do not have health insurance, you will be responsible for following our self payment policy:

1. You are ultimately responsible for payment of the services provided to you by one of our physicians. We **require** the following partial payment/deposits prior to your appointment.

**The deposit will be applied to the charges incurred and you will
receive a bill for the balance due.**

*****If You Pay In Full At The Time Of Service Checkout
You Will Receive A 30% Discount*****

Service	Deposit
Office Visit – Primary Care Physician Or Physician Specialist	\$150.00 Deposit for Initial New Patient Office Visit \$75.00 Deposit for Established Patient Visit
Office Procedures:	\$35.00 EKG \$65.00 BREATH TEST (h-pylori) \$40.00 BLADDER SCAN \$50.00 LABS \$75.00 ANOSCOPY
Unlisted Office Procedure:	

2. Payment on unpaid balances is expected within 30 days. If you are unable to pay your balance in full, please contact the Business Office at (847) 843-0806 to discuss payment plan options. A monthly payment is required to keep your account current.

3. Should you have any questions or have information to share with us regarding your account, please contact the Business Office at (847) 843-0806 and ask to speak with a patient account representative.

Patient Signature

Date

Patient Name (printed)

Date

