

PATIENT FINANCIAL POLICY
Kay A. Johnston, M.D.

This office has contracts with Medicare and with many managed care plans. Please check with our reception staff to determine whether your plan is one of these.

If we have a contract with your plan, we will file a claim with your insurance company. The amount for which you are responsible (any deductibles, copays, percentages, or non-covered services) is required at the time of service.

If you do not have one of the plans with which we are contracted, the total cost of your visit is required at the time of service.

If at any time you are concerned about the cost of a procedure proposed by the doctor, you may ask for someone from the business office who will be happy to discuss the cost with you.

For your convenience in paying, this office accepts Master card and Visa in addition to cash and checks.

I certify that I have read the financial policy of Kay A. Johnston, M.D. and agree to abide by the policy.

Signature _____ Date _____