

ALVARADO HEALTHCARE — FINANCIAL POLICY

Welcome to Alvarado Healthcare! We're genuinely excited you're here, and our goal is to make your experience simple, transparent, and stress-free. Since healthcare billing can feel like learning a foreign language (and no one asked for that elective), this policy explains how things work so you always know what to expect.

We've kept it as clear and human as possible.

Insurance Coverage & Your Responsibility

We gladly bill your insurance as a courtesy, but every plan is different — some are generous, some are mysterious, and some require interpretive dance to understand.

Here's how it works:

We verify benefits on your behalf, but verification is not a guarantee of payment.

As a courtesy, Alvarado Healthcare may submit claims to your insurance company when benefits are assigned. Please understand that your insurance policy is a contract between you and your insurance carrier, and you remain ultimately responsible for all charges related to your care.

Estimated co-pays, deductibles, coinsurance, and non-covered services are due at the time of service.

If your insurance doesn't cover a service, denies a claim, or applies it to your deductible, you're responsible for the remaining balance.

If a claim remains unpaid after 90 days, we may contact you for assistance in resolving the claim with your insurance company.

If a balance remains unpaid after 120 days, and the delay is not due to verified insurance processing or an approved appeal, we reserve the right to transfer the balance to patient responsibility, and payment may become due at that time.

Any overpayments will be refunded or credited appropriately.

We will always be honest with you about your financial options and do our best to avoid surprises.

Non-Covered & Out-of-Network Services

Some services are simply not covered by insurance. Common examples include:

- Laser therapy
- Dry needling
- Shockwave Therapy
- Certain evaluations
- Physical therapy or rehab codes (depending on plan)
- Massage therapy
- Any service Medicare does not consider a “covered chiropractic service”

If a service is non-covered, we'll let you know in advance so you're never guessing what you're being charged for.

Medicare Patients

Medicare covers spinal manipulation only. Everything else — exams, therapies, extremity adjustments, laser, dry needling, and rehab — is your responsibility.

We'll explain what is and isn't covered so you feel confident about every step of your care.

Payment Methods & Card-on-File

To keep billing smooth and avoid those awkward “your payment didn't go through” conversations, we keep a secure card on file for:

- Co-pays
- Deductibles
- Coinsurance
- Non-covered services
- Missed appointment fees (see policy below)

We will always notify you of any unusual or unexpected charges before processing.

Balances & Billing

If you ever have a question about your balance, just ask — we're here to help.

Balances older than 60 days may be automatically charged to your card on file unless other arrangements are made.

We promise never to charge your card without your knowledge. We dislike that as much as you do.

Statements & Communication

You may receive:

- Text reminders
- Portal messages
- Emailed statements
- A friendly call/text from our team if action is needed

We will always communicate with respect and clarity.

Your Role in the Process – To help us help you:

- Bring your insurance card to every visit
- Let us know if your insurance changes
- Update any contact or payment information
- Ask questions whenever something feels unclear

You deserve to understand your care and your charges — it's your health, your plan, and your peace of mind.

Acknowledgment

By signing below, you confirm that:

- You've read this Financial Policy
- You understand your insurance benefits are ultimately determined by your insurance company
- You are responsible for charges not covered by your plan
- You authorize Alvarado Healthcare to bill your insurance and collect payment for services rendered

And we promise to always treat you with honesty, transparency, and a side of kindness.

Patient Signature: _____

Printed Patient Name: _____

Date: _____