



**The Neurologic Group**  
of Bucks and Montgomery Counties  
[www.TheNeurologicGroup.com](http://www.TheNeurologicGroup.com)

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**THE NEUROLOGIC GROUP'S FINANCIAL POLICY**

Thank you for choosing The Neurologic Group as your health care specialist.

Please review and sign our financial policy listed below:

The Neurologic Group will file a claim to your insurance carrier for payment of your services. We require complete insurance information at the time of service. If your information is incomplete, we will ask you to pay for your services.

Your medical insurance is a contract between you and your insurance company. It is your responsibility to know the policy limitations, exclusions, deductibles and copays of your insurance plan. Copays are due at time of service. If not paid at time of service, an interest fee will be added monthly. You are responsible for payment of your account and for any unpaid balances as indicated by your insurance carrier.

**MISSED APPOINTMENTS**

We would appreciate your help and the courtesy of a phone call if you are unable to keep your scheduled appointment. We require twenty-four hours notice for appointment cancellations to avoid a \$50.00 no-show fee. We may make a courtesy confirmation call a week in advance of your appointment.

**DELINQUENT ACCOUNTS**

Billing statements are mailed the beginning of every month. Any amount not covered by the patient's insurance is due within 30 days of the statement. An account is considered past due 30 days following the statement date and will be assessed a monthly \$15.00 statement processing fee. If an account is older than 60 days, a collection letter is mailed monthly. Unpaid balances over 90 days are considered delinquent and may be forwarded to a collection agency. Failure to pay balances may result in discharge from the practice.

**MOTOR VEHICLE AND WORKERS COMPENSATION CASES**

The patient must provide all pertinent insurance information to include insurance carrier name, address, adjuster name and phone number, claim number and date of injury. Health insurance must be provided at the initial visit in the event a claim is exhausted or denied. If the policy is an HMO, a referral must be obtained for each visit. Once a motor vehicle claim is exhausted, and health insurance pays remainder of claim, the patient is responsible to pay the balance. We will not bill an attorney, or wait until a case settles. We do not accept letters of protection from attorneys.



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**LITIGATION CASES**

We do not get involved with any litigation accounts, disputed work comp cases, divorce decrees or auto accident cases. You will be responsible for any balances due.

**RETURNED CHECKS**

A \$25.00 fee will be assessed for all returned checks. Balances due after a check has been returned must be paid by either cash or credit card.

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PRINT PATIENT'S NAME

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PATIENT/GUARDIAN SIGNATURE

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DATE