



FINANCIAL POLICY

You have registered as a **private pay patient**. This means that at the time of service you will be paying by check or credit card. We will NOT bill your insurance carrier for services provided under this arrangement.

60 minute session: \$126

Please talk to the billing manager at 425-641-5801 if you have any questions regarding this arrangement.

Missed Appointments & Cancellations: appointments not kept or cancelled without 24 hours notice prior to the scheduled appointment time will be charged a **\$95.00** cancellation fee. These charges cannot be billed to your insurance company and will be your responsibility. Missed appointment fees must be paid at the next scheduled appointment. If you miss 3 appointments without proper notice, all future appointments will be cancelled.

I agree to:

- 1) Pay at the time of service, and
- 2) Waive insurance billing by MTI Physical Therapy

Patient Name _____

DOB: _____

Patient Signature _____

Date _____