

# FAMILY PRACTICE ASSOCIATES, P.C.

433 Summit Blvd, #201  
Broomfield, CO 80021  
Phone: 303-673-9090

## SELF-PAY FINANCIAL POLICY

Patients that are considered Self-Pay and eligible for a discount:

- Have no public or private health insurance coverage of any kind
- If we are not contracted with the insurance

Patients NOT eligible for Self-Pay discount:

- Patient has no insurance card to present
- Patient seeking care out-of-network or other than at their assigned clinic
- Patient has insurance but chooses not to bill them
- Patient has a high deductible or high co-pay
- Motor Vehicle Accidents

Self-Pay patients are required to submit a \$125 deposit prior to being seen. Deposit must be cash/charge/debit. After the visit, the charges will be determined as closely as possible and the proper amount will be collected after applying a 25% discount. The discount is offered on the office visit, procedures, and immunization administrative charges but not on office labs. If the patient leaves without checking out, the \$125 will be used towards the visit and no discounts will be given.

Once the doctor's notes have been completed, there may be additional charges that weren't on the fee ticket at the time of service.

**The patient is responsible for the balance of all charges. We will keep a credit card on file and notify the patient of any outstanding balance before processing the payment.**

The patient agrees to adhere to the Self-Pay policies of Family Practice Associates.

\_\_\_\_\_  
Patient Name (print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Patient Signature (or Responsible Party)

\_\_\_\_\_  
Date