



Virginia Therapy & Fitness Center, PLC

1831 Wiehle Avenue - Second Floor - Reston, VA 20190
703-709-1116 - www.VTFC.com

Financial Responsibility:

Patients who carry health insurance should remember that the Virginia Therapy & Fitness Center participates with health insurance as an out of network provider. As a courtesy, the Virginia Therapy & Fitness Center bills health insurance carriers and applies payments received in the clinic to patient accounts. You are responsible for making timely payments on any balance due. A service charge of 1.5% per month will be added to unpaid account balances after insurance has adjudicated the claim. In the event of default on your account you understand that you will be responsible for 33.33% of your account balance in attorney collection fees or collection agency charges.

Date

Signature of Financially Responsible Party

Assignment of Benefits:

I, _____ request that payment for applicable insurance benefits be made on my behalf to the Virginia Therapy & Fitness Center for services rendered by the Virginia Therapy & Fitness Center. I certify that the information I have reported with regard to my health insurance coverage is correct. I permit a copy of this authorization to be used in place of the original. This authorization may be revoked by either me or the above-named carrier at any time in writing.

Date

Signature of Subscriber or Beneficiary

Important Notice Regarding Patient Information:

I understand that all the health information gathered by Virginia Therapy & Fitness Center, PLC as a result of my examination and treatment will be handled according to Virginia Therapy & Fitness Center's Privacy Policy. I have received a paper copy of this policy. Furthermore, I understand that this policy may be updated from time to time and I may request a copy for as long as Virginia Therapy & Fitness Center maintains a record of my health information.

Date

Signature of Patient or Guardian

Please release any of my protected information to the individual listed below subject to the restrictions listed below (this release is effective for no more than six months):

Name

Restrictions

Release Expires (Office use only)