

Schreiber Allergy
Rachel L. Schreiber, M.D., FAAAAI

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www.schreiberallergy.com

PAYMENT POLICY

We are committed to providing you with the best possible care. If you have medical insurance, we are also eager to help you receive your maximum allowable benefit. We do need your assistance and your understanding of our payment policy.

Co-payments are required at the time of service. We accept cash, checks, Discover, Mastercard, and Visa.

Due to the changing health insurance laws and regulations, we cannot guarantee that all services will be covered by your insurance policy. **In the event that your insurance does not cover your services and/or supplies (including allergy serum), you will be held responsible for payment.**

CANCELLATION POLICY

We require 24 hours notice for any cancellations. Failure to do so may result in a \$50.00 fee.

We strive to provide medical services on a cost-efficient basis. If you have any questions concerning these policies or any uncertainty regarding insurance coverage, please do not hesitate to ask us. Please sign below indicating that you understand the billing practice of Schreiber Allergy.

Responsible party's printed name and date

Signature of responsible party

Printed patient's name (if applicable)