

Meryl Brandwein Nutrition OFFICE POLICY STATEMENT

Agreement to Terms of Treatment

Please read these policies carefully before initialing.

By initialing, or by not initialing, but receiving care after having had opportunity to read them, you are agreeing to all of our terms of treatment.

Thank you for visiting our office. As a patient of Meryl Brandwein Nutrition you will be a part of a health care team focused solely on supporting your health goals. At MBN, our approach to nutrition begins with a thorough assessment of your symptoms. By using a holistic approach and through a personalized multifaceted treatment plan including nutrition education, nutrition intervention, physical movement and stress reduction techniques. Please be aware of the following office policies.

OUR GENERAL POLICIES

OFFICE HOURS:

Generally, Monday, Tuesday (Boca Office), Wednesday and Thursday, between the hours of 10:30am-4:30pm. Other hours are available by special arrangement.

CONFIDENTIALITY:

Issues discussed during the course of evaluation, treatment or therapies are confidential. No information will be released to anyone (including third party payers, physicians, schools, etc.) without written consent from the patient, or if a minor, by the legal guardian of the patient. Often, third party payers will request information from the provider of services in order to determine eligibility for reimbursement. Please be sure to ask your insurance carrier about the type and amount of information that they might request before giving your written consent. It is important to understand that the release of confidential information with or without consent is required in situations of potential harm to oneself or others, in instances where the court may subpoena records and in cases of suspected child abuse. Whenever possible, you will be notified in advance prior to any such disclosure. The laws of the State of Florida require health professionals to report suspected cases of abuse (physical and/or sexual) and neglect to appropriate agencies.

ETHICS AND PROFESSIONAL STANDARDS:

Meryl Brandwein is committed to uphold the most responsible ethical and professional standards possible and is accountable to you. If you have any questions or concerns about your course of treatment please discuss them directly with her.

If, during the course of your care and treatment, you have any questions about the nature of your treatment (i.e. goals, supplement recommendations, etc.) or our billing practices please feel free to ask.

TELEPHONE CALLS:

Nutritionist Meryl Brandwein is available (on a call back basis) to patients for a short (5-10 minutes) telephone consult, however, if longer than 15 minutes will be billed as an office appointment according to the time.

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EXTENDED SESSIONS:

From time to time, particularly when an important issue is being explored, a session extends longer than originally planned or scheduled. Because fees are charged by the time it will be billed accordingly.

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OUR FINANCIAL POLICIES

INSURANCE:

MBN does not participate with any insurance carrier. We are not able to submit medical claims on your behalf. We would be happy to provide you with the necessary receipts (super bills) and CPT codes so you can submit them in for reimbursement. We cannot assist you with claim resolution.

Please note: If requests for patient files and insurance requests for validation of services becomes excessive there will be an administrative fee of \$35.00 assessed to your account.

PAYMENT INFORMATION

Our office accepts cash, checks or credit cards (MasterCard, Visa, Amex) for services rendered. When you schedule the initial visit, we request a credit card be put on file to hold the appointment for you. No charges will be

applied to your credit card unless you miss or cancel an appointment without proper notice. On the day of your scheduled appointment, all charges for consultations will be due upon check-in.

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CANCELLATIONS and MISSED APPOINTMENTS:

Due to the consistent requests for consultations, there is a 1-day cancellation policy for your Initial appointment. Your appointment must be cancelled at least 24 hours prior to your scheduled consultation or you will be charged for the visit. There is also a 24-hour cancellation policy for all follow-up appointments. You may cancel your appointment by calling the office. If calling after hours, please leave a message.

As we have booked a significant block of time for appointments between you and Meryl Brandwein and we do not double book ANY appointments, a missed appointment will be charged to the credit card holding the appointment. 1 day (24 hours) notice of cancellation of an appointment is required for all appointments. **Failure to keep the scheduled appointment or failure to cancel an appointment more than 1 day in advance will result in a charge for the expected service. Monday appointments must be canceled by 10AM on Friday to avoid this charge.**

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RETURN POLICY:

MBN is happy to accept returns on unopened non-perishable merchandise within 14 days of purchase. We will credit back the card that you used to purchase the product(s). Please note that perishable items such as probiotics and protein bars CANNOT be returned.

Supplements that have been opened (seal broken) may NOT be returned for credit or a refund. Refunds will be given on items only and excludes shipping or any other handling charges.

KNOW YOUR INSURANCE

You are responsible for your insurance policy. Due to the vast variety of policies even within the same insurance company, and the constant changing of policies, we cannot be responsible for interpreting each individual policy. Therefore we urge you, the patient, to know your personal coverage and its limitations.

COLLECTION FEES and COSTS:

There will be a fee for returned checks and thereafter payment must be made with credit card or cash. In addition, in the event we must institute collection and/or court proceedings to collect unpaid fees (including missed appointments), you agree to pay, in addition to the outstanding fee, our costs and the value of any attorneys services incurred in the collection of those fees or any part thereof. Our settlement for a smaller amount than we initially demand shall not constitute a waiver of our right to recover full fees and costs.

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Statement of understanding:

Please ask before signing below or obtaining treatment if you have any questions about our office policies. Your signature below, or your receipt of services after having had an opportunity to read these policies and terms, constitutes your agreement to our office policies.

I have read this contract and agree to its terms.

Printed name of patient

Signature of patient/guardian/guarantor

Date

Printed name of guardian/guarantor

NOURISH. BALANCE. THRIVE.