



Eclipse Mental Health Services of Tulsa

817 S. ELM PLACE, SUITE C, BROKEN, ARROW, OK

P 918.940.4734 F 918.940.4737

FINANCIAL POLICY

Insurance as Payment: Eclipse Mental Health is only in network with Medicare/Medicaid and will submit claims in your behalf. You are responsible for any unpaid balance following submission and processing of insurance claims. For any commercial insurance that Eclipse Mental Health is not in network with, an invoice can be given for you to file and receive direct reimbursement from your insurance. Please be aware that benefits vary, and it is your responsibility to check with the insurance company regarding your policy and reimbursement with an invoice.

If your insurance changes, it is your responsibility to inform our staff. Any addition of secondary insurance to Medicare may result in a denial of claims.

Methods of Payment: Eclipse Mental Health accepts cash and major credit cards.

ONLY FILL OUT THE FOLLOWING IF YOU ARE A SELF-PAY PATIENT

A card is kept on file to ensure payments are completed the day of your appointment. It is your responsibility to maintain an active and up to date credit card on file. If you cannot make your payment the day of your appointment, please let the office know in advance. You must cancel your policy via email with a 30 day notice.

I, _____, have read the above policies. I understand them and agree to comply with them.

Patient Signature: _____ Date: _____

CREDIT CARD GUARANTEE FOR PAYMENTS AND BALANCES

Credit Card: (please circle) Amex Visa Master Card Discover

Cardholder's Name: _____

Cardholder's Billing Address: _____

Card Number: _____ Exp Date: _____ CID # _____