ART OF WELLNESS PATIENT INFORMATION SHEET

Art of Wellness ©2016

First Name _____ Last Name _____ Middle Initial _____ Age _____ Birth date _____/_____/_____

Address _____ Unit# _____ City _____ State _____ Zip Code _____

Email _____ ☑ Home phone _____ ☑ Cell phone _____

☐ work phone _____ (Check primary number) M ◯ F ◯ Gender _____/_____/_____ Social Security # _____ Driver's license # _____

Marital status _____ Name of Spouse _____ Spouse Phone number _____

Employer Name _____ Occupation _____ Work Address _____

Physician Name _____ Specialty _____ Phone # _____ Address _____

Insurance Carrier _____ Member # _____ Name of Insured _____ Relation to Insured _____

Emergency Contact Name _____ Relationship _____ Ph#1 _____ Ph#2 _____

Referred By: _____ Address _____ Phone # _____

Office Policies

1. Art of Wellness is required by law to maintain the privacy and confidentiality of your protected health and personal information. This policy is available in our waiting room for you to read or you can request a written copy. Please ask the receptionist for more information.
2. If you need to cancel your appointment, please inform us at least 24 hours prior to your appointment. **A missed appointment will be charged at full rate.** (see fee schedule below)
3. There is a service fee of $15.00 for every returned check from the bank
4. **We are out of network providers**. For services with Dr Cai we will contact your insurance company to verify your coverage. If acupuncture is covered, you will be responsible for your co-insurance payment at the time of treatment. For services with Dr Tan all patients are expected to pay their fee in full at the time of services rendered. We will provide a superbill form that may be sent to your insurance company for reimbursement.
5. You authorize the release of your medical records or any information necessary to process a claim with your insurance should they contact us.
6. We accept payment as: Personal Checks, Cash, Visa, Mastercard and Discover and American Express
7. Herb pick up orders require a credit card authorization at the time of order, you will be charged in full once herbs have been prepared. There are no returns on any opened powder or raw herbs. Unopened herbs may be returned for credit only.

FEE SCHEDULE

Doctor	Consultation	Acupuncture	Cupping	F/u Consultation	Herbs (wkly)	Missed Appointment.
Dr. Qineng Tan	$130	$120	$15	$90	$36 and up	$120
Dr. Xiaomei Cai	$130	$120	$15	$90	$36 and up	$120

X_____ Signature of Patient

X_____ Signature of Parent/ Guardian (If patient is a under 18 yrs old)

X _____ Date