

Insurance Statement

At this time, our office only accepts Tricare insurance. Payment is due at the time of service(s), to include any applicable Tricare co-pays. Since Dr. Marsiglia is not on your provider list, we cannot participate in pre-authorization procedures. However, once your bill is paid in full, we will gladly provide you the necessary documentation to file your insurance for reimbursement if applicable. Documentation can include a standardized billing summary, rationale for services, and invoice if necessary. Reimbursement is made to the patient via our documents verifying that you have paid, and thus the need for payment in full prior to documentation. We accept major credit cards, checks, or cash.

Our fees are commensurate with the industry standard for licensed psychologists. We realize, however, that psychological evaluation in particular can be costly. We desire payment in full at the time of testing, if unable to do so, please speak with Dr. Marsiglia during your initial visit.

Please sign below to signify that you are aware that Dr. Marsiglia is not on your insurance provider list, and as such, you will be financially responsible for any services performed. Also please sign below if you have Tricare insurance and your policy requires a co-payment.

NAME: _____

SIGNED: _____

DATE: _____