

Patient Registration Agreement

I understand that becoming a patient customer of a LiveOn Medical Center practice that there is a commitment of bringing the latest healthcare technology and best practices to manage the wellness of every patient.

I also understand that there is a personal responsibility of every patient to be an active participant and to take responsibility for their own health and wellness. LiveOn Medical focuses on the wellness of each patient and focuses on the desired outcome of longer, healthier living of every patient.

To accomplish the goals of LiveOn Medical, the patient customer has certain responsibilities.

1. First to be an active participant in the wellness plan that is developed collaboratively with you. The plan requires you to take responsibility for your health and well being. That means following the plan.
2. Second, it is your responsibility to ensure that the practice can provide efficient service to all patients by keeping appointments or providing notice of cancellation.

The health care team consists of the Provider and your “PHC” Personal Health Coordinator or nurse. Your healthcare team is there for you to treat your illness and to establish a plan to keep you as healthy as possible.

By accepting this contract of care it is understood that if the plan is not followed that the practice has the right to dissolve this contract and terminate the relationship.

You also have a financial responsibility. By accepting this agreement, you understand that if you fail to give 24-hour notice of cancellation that your account will be billed a \$50 no-show/cancellation fee. No-shows/Cancellation less than 48 for an Ultrasound will be billed a fee of \$100.00. Additionally, phone and web visits (Telehealth) will be billed at the designated rate.

I understand the responsibilities and accept the terms and conditions as part of becoming a LiveOn Medical Center patient.

PATIENT SIGNATURE

DATE

For Office Use Only

Have patient sign the Patient Financial Policy and the Patient Registration Agreement, scan both into chart and give patient the original copy.