

Big Sky Integrative Health, PLLC

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Clinic Policies

Welcome to Big Sky Integrative Health. Our mission is to serve your needs and to provide safe, effective, quality healthcare. We work in conjunction with other health care practitioners to optimize your health. We welcome any ideas you have to better serve you and enhance our services.

Insurance

It is your responsibility to make sure your insurance policy covers the treatment you are receiving. If any treatment is not covered by your policy, you are responsible for payment. You are responsible for in-house pharmacy and other supplies purchased in the office.

Payment

Full payment is due at time of service for office visits, co-pays, and supplements. We accept cash, check, credit, and debit cards. Checks denied for lack of funds will be assessed a \$25.00 fee. Payment plans are available upon request.

Appointments

For visits cancelled with a 24-hour notice there is no fee. There is a fee of \$30.00 for cancellations with less notice. A fee of \$45.00 is charged for missed appointments/no shows.

Phone Calls/Email

There is no fee for brief questions over the phone or by email. Phone consultations can be arranged if you cannot make it to the office. These are the same price as our office visits.

In the event you default on your account, you will be responsible for all third party collection fees, legal fees, and court costs. Any accounts not paid past 60 days will have a 1.5% interest rate applied to the monthly balance. I have read and understand that I am financially responsible for, and agree to pay for, all charges and services at Big Sky Integrative Health. I give permission for the release of information to my insurance company to process a claim. I am responsible to notify the office of any insurance carrier or policy changes if they arise.

Signature: _____

Date: _____