

Mary Jane Detroyer & Associates
Registered Dietitians and Exercise Physiologists
357 East 57th Street #14B, New York, NY 10022
Tel. 212-759-7110 Fax. 212-759-7113
Email:mjdetroyer@usa.net or meredithliss@aol.com

NEW PATIENT INFORMATION

PAYMENT:

Payment is expected at the time of your appointment. I accept cash, checks (made payable to **Mary Jane Detroyer, Inc.**) and credit cards (AX, MC, VISA).

APPOINTMENT:

Individual appointments are scheduled for a specific time. Your appointment will be held with your credit card. The card will only be charged for missed appointments if you do not notify me within 24 hours.

MEDICAL INSURANCE:

Some Health Insurance Plans offer coverage with a co-pay for nutrition therapy. I participate as a provider for several insurance companies noted below* . However, your specific plan may not cover nutrition therapy. You should check with your insurance provider to find out if you are covered under your specific plan.

If you are not a member of one of the Health Insurance companies listed below, please check with your insurance provider to see if they will reimburse you for medical nutrition therapy for your visit. You should also find out if you can go to a practitioner outside of network and still be reimbursed. If your provider reimburses you I will provide you with a superbill to submit for reimbursement of my fee. You are responsible for payment of the fee at time of visit.

I am also a provider for other Health Insurance Plans in which I offer a discount off my regular fees.[†]

I hereby acknowledge responsibility for this account and assume and guarantee payments of all charges against this account if they accrue.

Signature of responsible party: _____

Date: _____

* Various Plans from Oxford, United, Cigna, Horizon BCBS, Aetna

† Various Plans from GHI, WellChoice (NJ). Cigna, Oxford, Empire BCBS, OptumHealth, **Aetna**