



TREATMENT AGREEMENT AND FINANCIAL POLICY

1. Treatment Consent and Authorization.

I consent and authorize Sugarloaf Medical, P.C. (“Sugarloaf Medical”) to perform treatments including, without limitation:

- performance of physical examinations,
- prescription and administration of medications, vaccines, other therapeutics, and devices,
- performance of in-office diagnostic testing (including, without limitation: laboratory testing, ambulatory BP monitoring, stress testing, radiology diagnostic imaging, bone density scans and sleep studies),
- ordering of diagnostic testing to be performed at an outside facility (including, without limitation: CAT-scans, MRIs, nuclear radiologic studies, stress tests and endoscopies), and
- performance and prescription of medical procedures (including, without limitation: of ear wax removal, joint aspiration and injection, dermatologic and cosmetic procedures)

as deemed necessary or advisable by the attending physician or mid-level provider.

I understand, acknowledge, and agree that Sugarloaf Medical will not perform treatment over the phone, and that I must schedule an in-person visit with Sugarloaf Medical to receive treatments. *However, due to the COVID-19 Pandemic or other special circumstances*, the attending physician or mid-level provider may treat me without in person physical examination via a televisit.

If I am experiencing any communicable or contagious upper respiratory symptoms and/or conditions (for example, COVID-19, flu, strep throat or fever, sore throat, sinus congestion and/or coughing),

- **I may be asked to attend a preliminary appointment via televisit, and/or**
- **I may be required to sit for a COVID-19 rapid test before being seen in person.**

I understand that facial masks may be required in the office of Sugarloaf Medical. These policies are to be continued at the discretion of the attending physician or mid-level provider.

This consent and authorization is given in advance of any specific diagnosis or treatment and is continuing until revoked in writing.

2. Treatment Overview. Sugarloaf Medical treats most acute and chronic conditions encountered in primary care. Sugarloaf Medical works hard to focus on preventative care. Sugarloaf Medical also offers certain women’s health services.

I understand, acknowledge, and agree that Sugarloaf Medical participates in the Emory Health Information Exchange (HIE) in the effort to increase quality and patient safety across the care continuum through the exchange of health information. I can find more detailed information on this in the Notice of Privacy Practices form found on the Sugarloaf Medical website or will be made available to me at my request by the Sugarloaf Medical staff. **I understand, acknowledge, and agree** that Sugarloaf Medical will utilize its electronic access to certain external pharmacies to obtain my pharmacy records.

Sugarloaf Medical does not provide treatment for the following:

- psychiatric conditions (including: ADD, ADHD, and anxiety requiring use of controlled substances),
- pain management (including prescription of controlled substance [i.e., opioids] even if these were

- previously prescribed by another primary care provider),*
- non-rheumatologic musculoskeletal complaints (*including such complaints attributable to motor vehicle accidents, worker's compensation claims, and/or acute injury*),
- advanced dermatologic conditions and/or
- urgent or emergency care. *Please see section 6 on hospital admissions and emergencies.*

I understand, acknowledge, and agree that:

- I will provide truthful and complete medical history to Sugarloaf Medical prior to any treatment, as well as any updates to my medical history.
- I will adhere to the treatment prescribed to me by Sugarloaf Medical and complete diagnostic testing requested by Sugarloaf Medical.
- I will inform a physician immediately of any side effects of treatment or call emergency services (9-1-1) or, if able, present to the emergency room, in the case of life-threatening side effects or adverse effects.
- I will consult my Sugarloaf Medical P.C. physician prior to stopping any prescribed medications or otherwise changing my treatment plan without formal medical advice from my Sugarloaf Medical physician or other medical consultant specialist.

Non-Adherence Policy:

I understand, acknowledge, and agree that:

- If I do not adhere to my treatment plan, nor inform my physician I will receive a *non-adherence warning letter, phone call, portal eMessage, or SMS.*
- If I do not adhere to the visit policy (*see section 4*) and/or do not show up for a scheduled appointment *without* notice, I will receive a *non-adherence warning letter, phone call, portal eMessage, or SMS* in addition to the cancellation office fee described in the cancellation policy.
- If I fail to follow through on a specialist referral written for me and/or diagnostic testing ordered for me by my Sugarloaf Medical P.C. physician, I will receive a *non-adherence warning letter, phone call, portal eMessage, or SMS.*
- If I receive more than two non-adherence warning communications., Sugarloaf Medical P.C. has the right to dismiss me from the practice with thirty (30) days written notice to me.; and
- If I am dismissed from the practice a dismissal notice letter delivered by certified mail will be sent to my mailing address on file.

3. Visit Types. Sugarloaf Medical offers patients the following visit types:

- a) Annual Preventive Visits/Physicals and Well-Woman Exam Visits,
- b) Medicare Wellness Visits
- c) Chronic Disease Management Visits:
- d) New Signs/Symptoms and/or Abnormal Test Results Findings Visits, *and*
- e) Acute Illness Visits

- (a) **Annual Preventive Visits/Physicals and Well-Woman Exam Visits.** These visits will coverage-appropriate screening and diagnostic testing. The Annual Preventive Visits and Physicals are recommended annually for all patients of Sugarloaf Medical. Sugarloaf Medical also recommends that patients attending their first Annual Preventive Visit return for a follow-up visit to review the diagnostic results in person, to develop a treatment plan and follow-up for abnormal findings, and to allow the patient to ask questions in person. If a patient chooses not to schedule a follow-up, (s)he may still view results on the Patient Portal and/or request a copy of the results can be mailed to the patient. *Management of acute and chronic medical conditions and/or evaluation for symptoms are not considered preventive when managed during an Annual Preventive Visit, and will likely result in a co-payment, deductible, and/or co-insurance charges.*

Well-Woman Exam visits can be annual or every 3 years depending on the patient's health status. These visits include a pap-smear and physical exam.

**Please see section 19 for billing and insurance information regarding Annual Preventative Visits.*

- (b) **Medicare Wellness Visits.** These visits, as dictated by Medicare insurance, are limited in scope. The physician will develop a preventive and wellness plan. This is not the same as a physical visit and does not routinely include blood work.
- (c) **Chronic Disease Management Visits.** Chronic diseases develop over time and are due to many factors such as poor nutrition, environmental or genetic factors, or smoking. The frequency of these management visits will be determined based on the unique medical diagnosis and patient status.
 - **Stable Disease Visit.** This visit allows your provider to assess and manage your disease status. For example, assessing the efficacy of your medications and monitor for side effects. Visits for stable or controlled conditions are usually planned and scheduled for the entire year during the Annual Preventive Visit or at the time of diagnosis.
 - **Uncontrolled Disease Visits.** This visit is for your provider to evaluate the severity and development of your disease and to monitor and update your treatment plan. These visits will be more frequent until the disease is controlled and stabilized.

Examples of routine follow-up schedules:

- stable chronic conditions- once every 6 months
 - controlled diabetes without insulin prescription- every 4 months
 - controlled diabetes on insulin- every 3 months
 - new medication- every 2-4 weeks until medications are optimized to the best therapeutic effect, and the disease is stabilized.
- (d) **New Signs/Symptoms and/or Abnormal Test Results Findings Visits.** These visits are for addressing new signs/symptoms and/or abnormal test results and developing a treatment plan moving forward. Undiagnosed signs or symptoms may require multiple follow-up visits until properly diagnosed and stabilized. Abnormal laboratory test results or abnormal diagnostic test findings that require counseling, follow-up testing, the prescription of medications or subspecialty care may require follow-up office visits.
 - (e) **Acute Illness Visits.** These visits are for acute illness care and developing a treatment plan. Acute Illness generally develops suddenly due to virus, infection, injury or misuse of medications/drugs and can be resolved relatively quickly. *For example*, the Flu, common cold, or an asthma exacerbation. Sugarloaf Medical usually schedules these visits for the next available appointment on the same day or next business day, wherever the provider's schedule allows.

IN THE CASE OF AN URGENT AND/OR LIFE-THREATENING CONDITIONS, PATIENTS SHOULD CALL EMERGENCY SERVICES (9-1-1) OR, IF ABLE, IMMEDIATELY PRESENT TO THE EMERGENCY ROOM.

4. Appointment Scheduling and Confirmation. Sugarloaf Medical provides treatment by appointment only. Patients may call the Sugarloaf Medical office to schedule an appointment *or* patients may submit a request to schedule an appointment online through the Sugarloaf Medical patient portal or the Healow phone application. Patients must arrive *fifteen minutes prior* to their appointment time to complete the check-in process and visit triage. Patients are highly encouraged to complete the check-in process, update their information, and pay their balance by following the check-in link sent via SMS, through the patient portal, or through the Healow app. During this process, patients will update any outdated demographic, medical history, insurance or pharmacy information in their profiles and resolve any remaining account balances. Patients should still be prepared to verify their check-in at the front desk, therefore patients must have a photo ID and health insurance card, if applicable, ready. Sugarloaf Medical does its best to attend to each patient at the scheduled appointment time. However, occasionally there may be circumstances that cause delays to the schedule. Sugarloaf Medical will provide reminders of patient appointments via phone call, email, and/or SMS text messaging.

If I am unable to attend my scheduled appointment:

- Please provide the office with *at least 48-hours' notice* to reschedule your appointment if needed.
- I understand, acknowledge, and agree that if I am unable to attend a visit, it is my responsibility to reschedule the visit.

- I acknowledge that Sugarloaf Medical does not recommend *cancelling* any appointment as that is considered **against medical advice**, given the circumstances surrounding the initial appointment.
- I agree that if I fail to provide Sugarloaf Medical with at least 48-hours' prior notice that I will not be able to attend an appointment and subsequently miss my appointment, then I must pay Sugarloaf Medical's Missed Appointment Fee of (i) **\$50.00** for missed office visits (routine and preventive appointments), and (ii) **\$75.00** for missed diagnostic testing visits, including, without limitation, Ultrasound and Sleep Study appointments.

5. After Hours Calls for Non-Urgent and Non-Emergency Circumstances. If a patient would like to talk to the on-call physician after normal business hours, on weekends, on holidays, or any other day that the office is not open, patients may call the main office number (770) 831-3018 and follow the instructions to speak with our after-hours call service. For routine office matters, Sugarloaf Medical patients should call (770) 831-3018 during office hours or leave a message after-hours. After-hours messages are typically returned the next business day.

6. Hospital Admissions and Emergencies. *In case of emergency*, patients should call emergency services (9-1-1) or immediately present to the emergency room.

Patients admitted to the hospital:

- are managed by medical professionals at the hospital,
- must inform Sugarloaf Medical of the hospital visit,
- and subsequently discharged from the hospital, are recommended to schedule a follow-up visit with Sugarloaf Medical, and
- are recommended to follow all hospital discharge instructions.

7. Visit Requirements:

I acknowledge, understand, and agree that:

- Sugarloaf Medical requires my picture identification (passport or state-issued driver's license) and insurance card, if applicable, prior to performing any and all treatments for all visits.
- I will bring actual medications or a list of medications that I am taking to every visit with Sugarloaf Medical.; and
- I will provide or have transferred to Sugarloaf Medical my medical record history and results of diagnostic testing performed by other physicians. I am responsible for the transfer of my medical records from other medical facilities to Sugarloaf Medical.

Prior to receiving treatment, I agree to:

- Complete, sign, and update Sugarloaf Medical's patient demographic and medical history forms and agree to continuously update my demographic, medical, insurance and pharmacy information,
- Review Sugarloaf Medical's Notice of Privacy Practices, and
- Review and complete any and all additional onboarding documentation requested by Sugarloaf Medical for the initial visit and any additional documents needed for future visits.

8. Patient Portal and Healow Phone Application. Each Sugarloaf Medical patient will be given access to a secure patient portal. The patient portal can be accessed through direct link sent via email or by accessing the Sugarloaf Medical website (www.sugarloafmedical.com). This service is designed to improve physician and patient communication. Once you are registered as a patient and have provided Sugarloaf Medical with your secure email, you will be assigned a username and password.

After you register with the patient portal, you will be able to:

- update your contact information,
- request your own appointments,
- view and communicate about laboratory and diagnostic results,
- request prescription refills,
- view your medical summary, medication list, treatment history and visitation dates,

- receive reminders through your email,
- view current and past statements,
- pay your account balance, and
- communicate with Sugarloaf Medical physicians and staff.

**Please note* that the patient portal requires a *separate* consent that Sugarloaf Medical will provide for you in electronic form the first time you log in, as well as in your patient onboarding documents.

9. Laboratory Tests. Sugarloaf Medical, in partnership with LabCorp, offers laboratory testing in office with LabCorp employed Phlebotomists and equipment. For any laboratory testing, *patients are required to:* ensure insurance coverage and arrange billing and payment with LabCorp. Patients can expect to receive an invoice *directly from LabCorp* regarding laboratory testing, *not* from Sugarloaf Medical.

However, *some* insurance plans allow for Sugarloaf Medical to bill for these same lab services directly. In this case, patients can expect a bill from Sugarloaf Medical outlining the patient's responsibility payment for the third-party lab services. It is important for patients to become familiar with their individual insurance plan's benefits.

Patients or their Insurance carriers with a blood laboratory preference outside of LabCorp are responsible for telling his/her provider and medical staff at Sugarloaf Medical prior to any testing is performed in the office. Sugarloaf Medical providers can provide an order for the recommended testing to be performed at the patient's preferred choice of blood laboratory. The patient is then responsible for scheduling and attending the preferred blood laboratory for testing, transferring the test results to Sugarloaf Medical and handling all billing matters directly with the blood laboratory.

10. Diagnostic Tests. Sugarloaf Medical offers multiple diagnostic tests performed at Sugarloaf Medical offices, including, but not limited to:

- General and Cardiovascular Ultrasounds,
- Home Sleep Studies,
- Bone Density Scanning (i.e. DEXA), and
- 24-hour blood pressure monitoring.

Please note, Sugarloaf Medical utilizes outside consultant services to read and interpret diagnostic results. Some health insurance plans require these consultant physicians to submit a billing claim directly, rather than through Sugarloaf Medical. In this case, patients can expect to receive a direct invoice from the consultant physician services. Please familiarize yourself with your plan benefits and coverage.

If a test or procedure must be performed at an *outside facility*, patients are required to make their own appointments, ensure insurance coverage, ensure completion of prior authorization if required by their health insurance, and arrange billing and payment with the outside facility. Usually, the diagnostic facility will ensure completion of prior authorization, however some instances require Sugarloaf Medical's involvement. It is the patient's responsibility to inform Sugarloaf Medical of any required Sugarloaf Medical involvement. Sugarloaf Medical will provide a list of recommended outside facilities for testing and Sugarloaf Medical is able to assist patients in making appointments if needed. Patients may choose the facility of their liking or as required by their insurance plan.

11. Referrals. When needed, patients will be given referral recommendations to other subspecialists. Patients receiving referrals will have the option of choosing their own subspecialist. Patients are required to make their own appointments with subspecialists, ensure that the subspecialist is in-network with their insurance plan, confirm coverage with their plan, and inform Sugarloaf Medical that their health insurance requires prior authorization if applicable. Patients are also required to arrange billing and payment with the outside facility. Sugarloaf Medical is able to assist patients in making appointments if needed.

12. Test Results Reporting: Diagnostic Test Results (laboratory and radiology imaging) are usually reported over the patient portal. For certain results, the physician and/or office staff may call the patient by phone to discuss the results. If tests results are sensitive, require further work-up, or a change in management and/or counseling, I understand that I may be requested to return for a follow- up visit. Patients will receive an e-mail notifying them that test result information is available, and will need to log in with their secure patient portal log-in or the Healow app to access the test results. If I do not execute the patient portal consent, or otherwise refuse to use the patient portal, I agree

to call the Sugarloaf Medical office directly to obtain my test results.

If Sugarloaf Medical is unable to speak directly to the patient regarding test results, as the patient I understand, acknowledge, and consent to Sugarloaf Medical leaving a voicemail message on or sending a SMS (text message) containing test result summaries to the phone numbers I have provided.

If you have a question regarding results or need clarification (or if results are not received), communicate with your provider directly through the patient portal, call the office and leave a message, or schedule a follow-up visit. ***I understand, acknowledge, and agree that if I do not receive a notification of test results within a reasonable time, I am obligated to contact Sugarloaf Medical and/or the facility that performed the applicable testing.*** If the case of certain results, Sugarloaf Medical may request that the patient present to the emergency room.

13. Medical Record Requests. Patients wishing to disclose and/or request a transfer of their medical information to a third party or this facility are required to complete the *Authorization to Release/Request Your Protected Health Information* form, which can also be found on the Sugarloaf Medical website (www.sugarloafmedical.com/forms). During onboarding and on a routine basis prior to office visits, patients are responsible for providing medical records from outside healthcare providers or for providing a completed and signed authorization form for Sugarloaf Medical to request medical records on the patient's behalf. *For example*, patients may develop medical records from specialists or hospitals, and diagnostic test results from outside facilities and would provide a copy of those records or provide a signed consent form for Sugarloaf Medical to submit to those listed outside healthcare providers.

14. Medication Refills. I understand, acknowledge, and agree that in order to have medication refilled, I must attend an in-person visit at Sugarloaf Medical. ***I understand, acknowledge, and agree that if I miss an appointment, to promote the safety of Sugarloaf Medical patients, Sugarloaf Medical will not grant refills.***

For the convenience of our patients, patients may obtain a medication refill by:

- contacting the office directly via phone call,
- logging into the secure patient portal, or
- using the Healow phone application.

Patients should allow *three (3) business days* for a refill to be granted. For medication refills prescribed by providers or subspecialists other than Sugarloaf Medical personnel, patients must contact those providers/subspecialists directly. Sugarloaf Medical does not usually prescribe or refill Schedule II medications. For schedule II medications, please contact the prescribing provider directly.

Insurance and Financial Policies

15. Insurance Plan Benefits. Sugarloaf Medical participates with most insurance plans through the Emory Healthcare Network with limited exceptions. Sugarloaf Medical does not accept Georgia Medicaid, limited benefit/coverage insurance plans, critical illness plans and indemnity plans.

I understand, acknowledge, and agree that:

- each insurance plan has different benefit packages and regulations; it is impossible for Sugarloaf Medical to know all insurance packages and/or to verify benefits for each patient and/or service.
- **it is my responsibility to be familiar with my insurance benefits, including policy benefits coverage and out of pocket expenses (copay, deductible, co-insurance, etc.).**
- it is my responsibility to verify that Sugarloaf Medical physicians are in-network providers with my insurance policy.
- Sugarloaf Medical treats patients based on their healthcare needs and not on what a specific insurance plan covers.

I understand, acknowledge, and agree to pay the portion(s) of services I am deemed to be responsible for, including, without limitation, out of pocket expenses as determined by my insurance carrier and charges for noncovered services.

16. Patient Payment Agreement and Failure to Pay. For the convenience of our patients, our patients are able to pay account balances via telephone, by logging into the secure patient portal, or via Healow Pay by logging into www.healow.com

I understand, acknowledge, and agree that:

- I must keep my account in good standing (i.e. current on payments) at all times.
- If I am unable to pay Sugarloaf Medical because of financial hardship, I must contact Sugarloaf Medical to make a special payment arrangement. Third party financial partners (e.g. Care Credit) are available for assistance.
- My failure to pay may result in being unable to receive further services and/or schedule further visits with Sugarloaf Medical.
- Sugarloaf Medical maintains the right to deny services for me after any account balance exceeds ninety (90) days past due and to use collection services to obtain payment on any outstanding amounts, including payment required for late payment fees and collection agency fees.; and
- Failure to pay Sugarloaf Medical may result in my dismissal from treatment at Sugarloaf Medical.

17. Insured Patient Payment Policy.

I understand, acknowledge, and agree that:

- my insurance carrier determines my responsibility for payment of co-pays, co-insurance, and deductibles, and that if I have any questions about my responsibility for payment, I need to contact my insurance carrier directly.
- Sugarloaf Medical will collect co-payments and any balance in full on my account from previous services on *each visit*. Sugarloaf Medical will also collect the estimated balance for services provided and diagnostic testing at the time of service.
- I am responsible for paying deductibles and co-insurance amounts in full as determined by my insurance carrier within thirty (30) days of receiving a billing statement from Sugarloaf Medical.
- I have an active insurance card and will present this card to Sugarloaf Medical at each visit, unless I am a Self-Pay Patient as described in Section 18.
- Without active insurance or with incorrect insurance information, Sugarloaf Medical will not be able to file my claims appropriately and I will be responsible for the payment of all charges.
- If my insurance coverage changes, I will notify Sugarloaf Medical as soon as I can to avoid claim denial due to timely filing.
- I am responsible for the coordination of my health insurance benefits should I have more than one (1) health insurance policy. In coordinating my benefits, I should designate one of my insurance policies as primary and the remaining as secondary. This will ensure the best possible coverage of my medical services. Therefore, I am responsible for any payment charged as a result of incomplete coordination of my health insurance benefits.
- If a third-party vendor is used, (*for example*, blood draws, sleep study diagnostic testing and ultrasound diagnostic testing) *some* insurance plans require billing and insurance processing to be carried out and completed by those third-party vendors. Those third-party vendors will bill the patient directly. *Please see sections 9 and 10 for more information.; and*
- Due to new legislation and regulation, Sugarloaf Medical may now bill select insurance providers, including Medicare, for telehealth services. Some of these telehealth services will only last as long as the pandemic remains a public health emergency, others will be permanent additions.

18. Self-Pay Patient Policy. Patients who do not use insurance to pay for their treatments at Sugarloaf Medical are considered *Self-Pay Patients*. Prior to each visit, Sugarloaf Medical will provide an estimate based on the type and complexity of the visit to Self-Pay Patients covering the visit, diagnostic testing and/or procedures. If a Self-Pay Patient receives additional testing and/or treatments not contemplated by the estimate, Self-Pay Patients may be required to pay additional amounts at the time of service. If payment in full is not made at the time of service, patients are still responsible for the full balance remaining on their accounts, including amounts not provided for in estimates.

19. Annual Preventive Visit. Sugarloaf Medical patients are encouraged to have an Annual Preventative Visit every year.

- Annual Preventive Office Visits *may* be covered one hundred percent by a patient's insurance carrier; however, Sugarloaf Medical cannot guarantee such coverage is included in your plan.
- *Please note* that Sugarloaf Medical Annual Preventive Visit screening and diagnostic testing is usually more

- comprehensive than what is recommended by your health insurance plan.
- *Some* plans may require at least one (1) year to pass from the date of the last physical to cover this Annual Preventative Visit.
- Patients are responsible for annually familiarizing themselves with and verifying their insurance coverage and benefits.
- Other associated preventive laboratory and diagnostic testing may not be covered at one hundred percent or considered preventative by some insurance plans, and co-pays, co- insurance, deductibles, and/or other payments may apply.
- Patient Annual Preventive Visits are usually billed with the preventive visit ICD-10 and age- appropriate CPT code. Typically, ONLY Annual Preventive Office Visit CPT codes are covered at one hundred percent (100%) by most insurance carriers. **See the Information on Annual Preventative Visits office document for more details.*

I understand, acknowledge, and agree that management of acute and chronic medical conditions and/or evaluation for symptoms are not considered preventive when managed during an Annual Preventive Visit, and will likely result in a co-payment, deductible, and/or co-insurance charges.

20. Medicaid. ***I consent*** to be billed for services by Sugarloaf Medical that may be payable by Medicaid because Sugarloaf Medical does not accept Georgia Medicaid and does not participate in Medicaid. ***I agree*** to inform Sugarloaf Medical if I am a Medicaid beneficiary, including when Medicaid is used as a *secondary* insurance to Medicare.

21. Assignment of Benefits. ***I hereby authorize and request*** that payment of benefits by my primary insurance company and secondary insurance company (if any) be made payable directly to Sugarloaf Medical for services furnished to me. ***I hereby assign, transfer, and convey*** my rights, title, and interest to Sugarloaf Medical in and to all medical expense reimbursement payable to me.

22. Payment Method. Sugarloaf Medical accepts personal checks, cash, MasterCard, American Express, Discover, and Visa. Checks should be made payable to Sugarloaf Medical, P.C. ***I understand, acknowledge, and agree that*** if my check is returned for any reason, a \$50 service charge will be charged to my account. ***I understand, acknowledge, and agree that*** if a payment by check is unsuccessful, Sugarloaf Medical may require me to pay for all future visits by cash or credit card. ***I understand, acknowledge, and agree that*** if I find I need financial assistance in paying a medical bill in full, I will request information from and work with Sugarloaf Medical regarding third party financial assistance programs. *For example, Care Credit.*

23. Severability. The invalidity of any portion of this Agreement will not and shall not be deemed to affect the validity of any other provision. If any provision of this Agreement is held to be invalid, the parties agree that the remaining provisions shall be deemed to be in full force and effect as if they had been executed by both parties subsequent to the expungement of the invalid provision. This Agreement shall be interpreted pursuant to the laws of the State of Georgia.

24. Entire Agreement. This Treatment Agreement and Financial Policy constitutes the entire agreement among Sugarloaf Medical and the patient with respect to the subject matter hereof and supersedes and cancels any prior agreements among Sugarloaf Medical and the patient regarding the subject matter hereof.

I have carefully read and considered the provisions of this Treatment Agreement and Financial Policy as of the date set forth below, and I sign the same of my own free act.

Signature of Patient or Legal Guardian

Date of Birth

Print Name of Patient or Legal Guardian (and Relationship to Patient)

Date

REMAINDER OF PAGE IS INTENTIONALLY LEFT BLANK