

**Paul S. DeMarco, DPM**  
401 Shore Road  
Somers Point, NJ 08244  
609-927-4894

## **Office Policy**

### **Cancellation Policy**

As all of our patients are valuable to us, so is our time with them. We ask that appointments be cancelled at least 24 hours prior to the appointment in order to allow other patients to utilize this time. If this policy is not honored, a \$20 cancellation fee will be added to your account. This fee must be paid before any further appointments can be scheduled. After 3 missed appointments, you may no longer be treated in our office.

### **Copays & Referrals**

If a copay and/or referral are required by your insurance, they are due at the time of service. If you do not have your referral, we will reschedule your appointment. This is a requirement of your insurance company. If you request to be billed for your copay, a \$10 processing fee will be assessed.

### **Disability**

All paperwork related to a patient's disability requires 48 hours to complete.

### **Statements**

If a patient balance remains unpaid, a \$10 rebilling surcharge will be assessed on the third statement.

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Patient Signature

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Date