



Quality Care Rehab & Autism Center
15023 21 Mile Rd. Shelby Township, MI 48315
Phone: (586) 286-9644 Fax: (586) 286-9647
www.qcrp.com

Name: \_\_\_\_\_ Date: \_\_\_\_\_

AUTHORIZATION FOR PRIVACY GUIDELINES:

I hereby authorize that I have received the new patient Privacy Guidelines from Quality Care Rehabilitation Professionals, Inc. Should you have further questions or concerns that are not answered in the guidelines, please feel free to call our office so that we may assist you further.

X \_\_\_\_\_
Signature of Patient Date

AUTHORIZATION OF PAYMENT:

I hereby:

- Assign to Quality Care Rehabilitation Professionals, Inc. all insurance benefits applicable for the payment of treatment rendered.
• Understand that verification of insurance coverage does not guarantee payment for all services and amounts not paid by my insurer.
• Know and agree that I am responsible for all insurance co-pays, deductibles, non-covered services and amounts not paid by my insurer.

X \_\_\_\_\_
Signature of Patient Date

AUTHORIZATION FOR RELEASE INFORMATION:

I hereby authorize Quality Care Rehabilitation Professionals, Inc. to release, in writing or orally, any records or information requested or necessary to my physician, employer, compensation carrier, insurance provider, rehabilitation specialist, case worker or my attorney and/ or beneficiaries and other related persons.

X \_\_\_\_\_
Signature of Patient Date