

deBarros Chiropractic Clinic  
7020 Cold Harbor Road  
Mechanicsville, VA 23111  
(p) 804-730-2609  
(f) 804-730-6496  
fixspinedc@gmail.com

Notice: automobile accident patients

If you have been in an automobile accident, you may be entitled to payment from your automobile insurance if you have medical expense benefits coverage. By signing this assignment of benefits form you are giving to your health care provider the right to receive some or all of that payment directly from your automobile insurance company.

If you have health insurance and your healthcare provider is in-network: as long as you provide information necessary to verify your health insurance coverage the healthcare provider may only bill the amount you owe for any copayment, coinsurance, or deductibles to your automobile insurance and you may be entitled to any remainder of your automobile insurance benefit.

If you do not provide information necessary to verify your health insurance coverage, do not have health insurance, or your healthcare provider is not in your health insurer's provider network: your health care provider may bill their full charges to your automobile insurance.

You may want to consult your insurance agent or attorney before signing or initialing this form.

**You are not required to sign/initial this form to receive care.** \_\_\_\_\_

---

Patient Name (Print)

---

Patient Signature

Date

---

Name of Custodial Parent of Legal Guardian, on Behalf of the Patient (Print)

---

Parent or Guardian Signature

Date