

**Ascent Therapy Clinics**  
**ASSIGNMENT OF BENEFITS, CONSENT OF RELEASE &**  
**NOTICE OF PRIVACY PRACTICES**

Date \_\_\_\_\_

Patient: \_\_\_\_\_ SS#/ID#: \_\_\_\_\_

Employer: \_\_\_\_\_ Claim Group: \_\_\_\_\_

I hereby instruct and direct \_\_\_\_\_ Insurance Company to pay by check made out and mailed to:

**Ascent Therapy Clinic** 9116 W. Bowles Ave #10 Littleton, CO 80123

or

If my current policy prohibits direct payment to provider, I hereby also instruct and direct you to make out the check to me and mail it as follows:

**Ascent Therapy Clinic** 9116 W. Bowles Ave #10 Littleton, CO 80123

for the professional or medical expense benefits allowable, and otherwise payable to me under my current insurance policy as payment toward the total charges for the professional services rendered. I authorize Ascent Therapy Clinic to deposit checks received on my account when made out to me. **THIS IS A DIRECT ASSIGNMENT OF MY RIGHTS AND BENEFITS UNDER THIS POLICY.** This payment will not exceed my indebtedness to the above mentioned assignee, and I have agreed to pay, in a current manner, any balance of said professional service charges over and above this insurance payment.

A photocopy of this Assignment shall be considered as valid and effective as the original.

**Consent of Release of Information**

I also authorize the release of any information pertinent to my case to any physicians, rehabilitation consultants, insurance company, adjuster, or attorney involved in this case, except as follows:

Signature of Policyholder \_\_\_\_\_ Date \_\_\_\_\_

Signature of Claimant, if other than Policyholder \_\_\_\_\_

**Acknowledgment of Receipt of Notice of Privacy Practices/HIPAA**

I, \_\_\_\_\_, have received the Notice of Privacy Practices from Ascent Therapy Clinics.

Signature \_\_\_\_\_ Date \_\_\_\_\_

In lieu of patient signature I, \_\_\_\_\_, a staff member of Ascent Therapy Clinics, state that the above named individual was offered our current Notice of Privacy Practices.

Signature \_\_\_\_\_ Date \_\_\_\_\_