



Policy on Acceptance of Personal Injury Cases

Trapp Spinal Care
Conrad L. Trapp, D.C.

2017 S. Elm Place, Ste. 100
Broken Arrow, OK 74012
918 449-9555

At Trapp Spinal Care (TSC) we are happy to accept your personal injury case and are pleased that you have chosen NUCCA chiropractic care. We want you to be assured that, following most accidents, NUCCA will provide you the best chance to return to pre-accident status.

The following policies will be in effect in order to ensure both quality care for you, our patient, and receipt of payment for our services during or upon completion of your treatment:

IMPORTANT: Please contact your auto insurance company **prior to your first appointment**, to find out if you have medical coverage on your policy, if you are not sure.

Sample Insurance Card

If you were not the driver at fault, and you, or the registered insured on the vehicle you were riding in, had Medical Coverage (Med-Pay or PIP) on your/their auto policy at the time of your accident, we require you to file a claim on that policy utilizing the medical coverage in addition to the claim that may be filed against any Liability Insurance of the driver at fault. If you do not wish to file on your policy, you may pay Trapp Spinal Care for services as they are rendered and seek reimbursement from the Liability Insurance at time of settlement. You must show proof that no Medical Coverage was in effect on your policy in order for TSC to wait for payment from the Liability Insurance company (from the at-fault driver).

Liability coverage (required)
Medical coverage (optional)

OKLAHOMA SECURITY VERIFICATION FORM	
INSURED DOE, JOHN & JANE	MUTL VOL
POLICY NUMBER 123 4567-B88-999	EFFECTIVE YR 2005 MAKE FORD
MODEL MUSTANG	FEB 21 2006 TO AUG 21 2006
AGENT BOB GOODHANDS	VIN 23N3343533XD3266
PHONE (918) 251-9999	
A	BODILY INJURY/PROPERTY DAMAGE LIABILITY
C	MEDICAL PAYMENTS
D	250 DEDUCT COMPREHENSIVE
G	250 DEDUCT COLLISION
H, U	
Good Guy Mutual Automobile Insurance Company	

If you are the driver at fault:

You may file a claim on the Medical Coverage (Med-Pay/PIP) of your auto policy,

OR

If no Medical Coverage is available, you will be required to pay for services as rendered. If you have health insurance covering out-of-network chiropractic care, TSC will provide you with completed health claim forms which you may submit to your insurance carrier for processing. You are responsible for any and all charges at time of service. Your health insurance benefits, if available, will be paid directly to you when your claim processes.

I have read this policy and agree to abide by it in exchange for chiropractic treatment by Conrad L. Trapp, D.C., dba Trapp Spinal Care.

Signed _____ Dated _____

Witness _____ Dated _____



If YOU were NOT at Fault:

****Following your auto accident, you will need to provide the following information **upon your initial visit.**

- 1. Police Report (if one taken)

OR

- 2. Your Automobile Medical Coverage and Policy Information.

Date and Place of Accident: _____

Insurance Company Name _____

Claim # _____ Policy Holder's Full Name: _____

Adjuster's Name: _____ & Phone: (_____) _____

Billing Address: _____

AND

- 3. The At-Fault Driver's Insurance Company

Full Name of Insured (Driver or Policyholder, if different): _____

Claim # _____ Policy Holder's Full Name: _____

Adjuster's Name: _____ & Phone: (_____) _____

Billing Address: _____

If YOU were at Fault:

- 1. Your Automobile Medical Coverage and Policy Information.

Date and Place of Accident: _____

Insurance Company Name _____

Claim # _____ Policy Holder's Full Name: _____

Adjuster's Name: _____ & Phone: (_____) _____

Billing Address: _____

OR

- 2. Your health insurance card. NOTE: If filing personal health insurance only, you will be required to pay Trapp Spinal Care as services are rendered, file your claim (claim form provided by Trapp Spinal Care), and wait to be reimbursed by your insurance company.