



MVA BILLING INFORMATION

State law requires us to bill your auto insurance when you are seeking health care related to a Motor Vehicle Accident. To do so we will need the following information. If you do not have the information requested below please call us within 24 hours with this information. If information is not called to us, within 24 hours, we will bill you directly until you do get the information to us.

Patient Name: _____

Patient Address: _____

Auto Ins. Name: _____

Claim billing address: _____

Telephone number: _____

Accident Claim number: _____

Date of Accident: _____

I hereby authorize Cedar Creek Internal Medicine (CCIM) to furnish the above insurance carrier with any information concerning this auto accident. I also assign benefits from this insurance carrier to CCIM.

Patient Signature

Date