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## **ON-SITE Program Agreement**

## **This program includes:**

- A full day of training at your office for you and all front desk CAs, insurance CAs and clinical staff members.
- A comprehensive review of your CPT codes, ICD codes, HCPCS codes, SOAP notes, Intake Forms, HIPAA
  Forms, Fee Schedules, Modifiers, Cash Plans, Insurance Verification Forms, Insurance EOBs and 1500
  Forms.
- 3 months of unlimited access to all Target Coding live webinars. The webinars are given just about every month and we cover many different topics.
- 3 months of follow-up support.
- Plus our monthly e-newsletter...stay up-to-date on the latest coding, billing compliance and documentation information.
- Cost: \$3,900 (one payment) or 2 payments of \$1,975.

Doctor Information	<u>n</u> : Name:		
Address, City, State, Zip:			
Office #:	Cell #:	Fax #:	Email:
payment or 2 consect doctor is responsible associated with the	cutive monthly payments of to reimburse Target Codi	f \$1,975) for the services ng for all travel & lodging hedules or cancels this agr	ng to charge the below credit card \$3,900 (one set forth in this agreement. The above named g expenses (e.g., airfare, hotel, car rental) reement, doctor is responsible to pay Target
Payment Method:	Visa MasterCard	AMEX	
Credit Card Numbe	er:		Exp. Date:
Cardholder Name:			Sec. Code:
Credit Card Billing	Address & Zip Code if did	fferent than above:	
THE BELOW PAI Dr. Mart Target Coding Repre	ty Kotlar		FOR THE WRITTEN ABOVE.  Signature
Date		Date	