Medicaid Private Pay Agreement

I understand that Paul Dibble MD and/or any other physician or health care provider working for Simple Traditions Family Health PLLC are doing business as Simple Traditions Family Health PLLC. They are accepting me as a private-pay patient for the period of one year, and I will be responsible for paying for any services I receive through Simple Traditions Family Health PLLC.

The physicians and other providers above will NOT file a claim to Medicaid for services provided for me, and Medicaid will NOT reimburse me for these services.

Name:		
	[Patient]	
Signature:		
	[Patient or, if minor, parent/guardian]	
Date:		