

# Waiver

For new patients of Dr. Mulcahy,  
who have Medicare and Mainecare plans

Since Dr. Mulcahy is no longer accepting new patients with Medicare and Mainecare, we are required to have your signature agreeing to the following:

By signing this form below I am opting to pay out of pocket for my visits with Dr. Patrick Mulcahy and I will not ask the office to bill my insurance company for my office visits nor will I bill my insurance company directly.

I have read and understand the practice's financial policy and I agree to be bound by its terms. I also understand and agree that such terms may be amended by the practice from time to time.

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Signature of patient (or responsible party, if minor)

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Patient's name (print)

Date