

Sierra Women's Health

IMPORTANT INSURANCE MESSAGE

Today, most insurance companies require that the patient be aware of the particulars of her insurance coverage. Further, the patient must fulfill certain requirements prior to being seen by a physician. Your failure to comply may result in reduced payment or denial of your entire claim.

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING BELOW

- I have been advised that if services rendered by Sierra Women's Health are considered to be "non-covered services" by my insurance company, I will be financially responsible.
- I have been advised that if Sierra Women's Health is not a contracted provider for my insurance company, I will be financially responsible for any and all charges rendered to me. I further understand that my insurance company may or may not cover charges for any tests, hospitalizations or procedures ordered for me by Sierra Women's Health.
- I have been advised that if my insurance company will not cover charges for services rendered without a referral from my primary care physician, and if I elect to receive care without this referral, I will be financially responsible for any and all charges for services provided by Sierra Women's Health.
- I have been advised that if I do not provide complete insurance information prior to my visit, Sierra Women's Health will be unable to determine whether or not I require a contract provider and/or a referral. If I elect to receive care under these circumstances, I understand that I will be financially responsible for any and all charges for services rendered until coverage for such services can be verified.

Patient Signature

Date

Please Print Name