

Commonwealth Sport and Spine

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INSURANCE WAIVER

Medicare and or your private insurance carrier will only pay for services that determines to be 'reasonable and customary' under Section 1862 (a) (1) of the Medicare law.

It will be the patient's responsibility to verify that your insurance will cover any procedure that you are requesting to be done or that we provide.

Private and Commercial insurances will deny coverage for the following reasons:

- A. Patient is not listed as a covered dependent on said plan
- B. Patient policy has terminated at time of service and/or patient did not present front desk with a current insurance card
- C. Acupuncture (have reached maximum covered benefits)

You may receive a statement/invoice if you (do not present the following at the time of your visit):

- A referral/authorization/referring script from your Primary Care Physician.
- A current copy of the insurance card every date of service.
- Are a self pay patient.

If Medicare and/or my commercial insurance should deny any or all charges and/or I do not present any of the items above, I agree to be personally and fully responsible for any and all balances due.

Signature

Date