

**IMPORTANT PLEASE READ CAREFULLY**

We appreciate your choosing Statesboro Plastic Surgery for your care. However, we do not participate with every insurance company. If you are a member of a PPO, POS, HMO, or any managed care program, please check with your insurance manual and/or insurance representative at your place of employment to see if we are on your provider list. If we are not, that does not mean that we will not file your insurance, but you could be penalized by your insurance company on claims. That holds true for any hospital that your company requires you to use for surgery. If we perform any insurance covered procedures in our office, a pathology specimen may be sent. We ROUTINELY send these to Southeastern Pathology Associates and Statesboro Pathology Associates. If the lab or hospital out facility used is out of network you may be penalized either by nonpayment or reduction in benefits. THIS INFORMATION IS TO BE OBTAINED BY THE PATIENT AND PROVIDED TO OUR OFFICE.

**IT IS THE RESPONSIBILITY OF THE PATIENT TO INSURE THAT ALL REFERRAL REQUIREMENTS ARE MET AT EACH VISIT. IF YOUR INSURANCE COMPANY REQUIRES THIS TYPE OF COORDINATION OF CARE, PLEASE MAKE SURE THAT THE REFERRAL IS IN PLACE BEFORE YOUR VISIT. FAILURE TO DO SO, MAY RESULT IN A HIGHER OUT OF EXPENSE FOR YOU.**

I have read the above and understand that I am responsible for any nonpayment or reduction in benefits to Statesboro Plastic Surgery, and/or any facility used as a result of not using a participating physician, laboratory, or facility as required by my insurance company.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_