



Insurance Discloser & Financial Responsibility Waiver

As a courtesy to our patients, Lake Norman Sleep Center (LNSC)/Piedmont Sleep Center (PSC) makes every effort to inform you of your estimated financial responsibility. This information is obtained directly from your insurance company, therefore, LNSC/PSC cannot guarantee that the coverage information quoted is accurate.

In the event you wish to confirm the estimated costs relayed to you, we advise you to contact your insurance company directly to obtain your estimated out-of-pocket costs. Your insurance sets the allowable amount of your sleep study and we are contracted with them. You can provide your insurance company with the following information to obtain that information.

- PSG (cpt code 95810, place of service 11)
- CPAP Titration (cpt code 95811, place of service 11)
- Split Study (cpt code 95811, place of service 11)
- Home Study (cpt code 95806, place of service 12)
- MSLT/MWT (cpt code 95805, place of service 11)

Any amount not covered by your insurance due to deductible, coinsurance, copay, or for any other reason will be billed to the patient. Any estimate given is strictly an estimate only and may change depending on how your insurance company processes the claim. There are no guarantees on exact amount or quote given.

LNSC/PSC will need to be notified of any change to insurance information. **If your insurance is not active or has been terminated after your study and before the claim has been processed, you will be billed the entire amount due.

I HAVE READ AND FULLY UNDERSTAND THIS INSURANCE DISCLOSURE

patient name (printed)

patient signature

date

** Any amount taken upfront is a downpayment for an estimated amount. You will be billed any difference and are solely responsible for any amount your insurance doesn't pay.*

Every effort is made to be sure that the information given to you today is accurate. If a conflict exists between the information provided to you and the terms of the plan, the terms of the plan will control. Final determination of coverage and patient responsibility is made at the time the claim is received and processed.