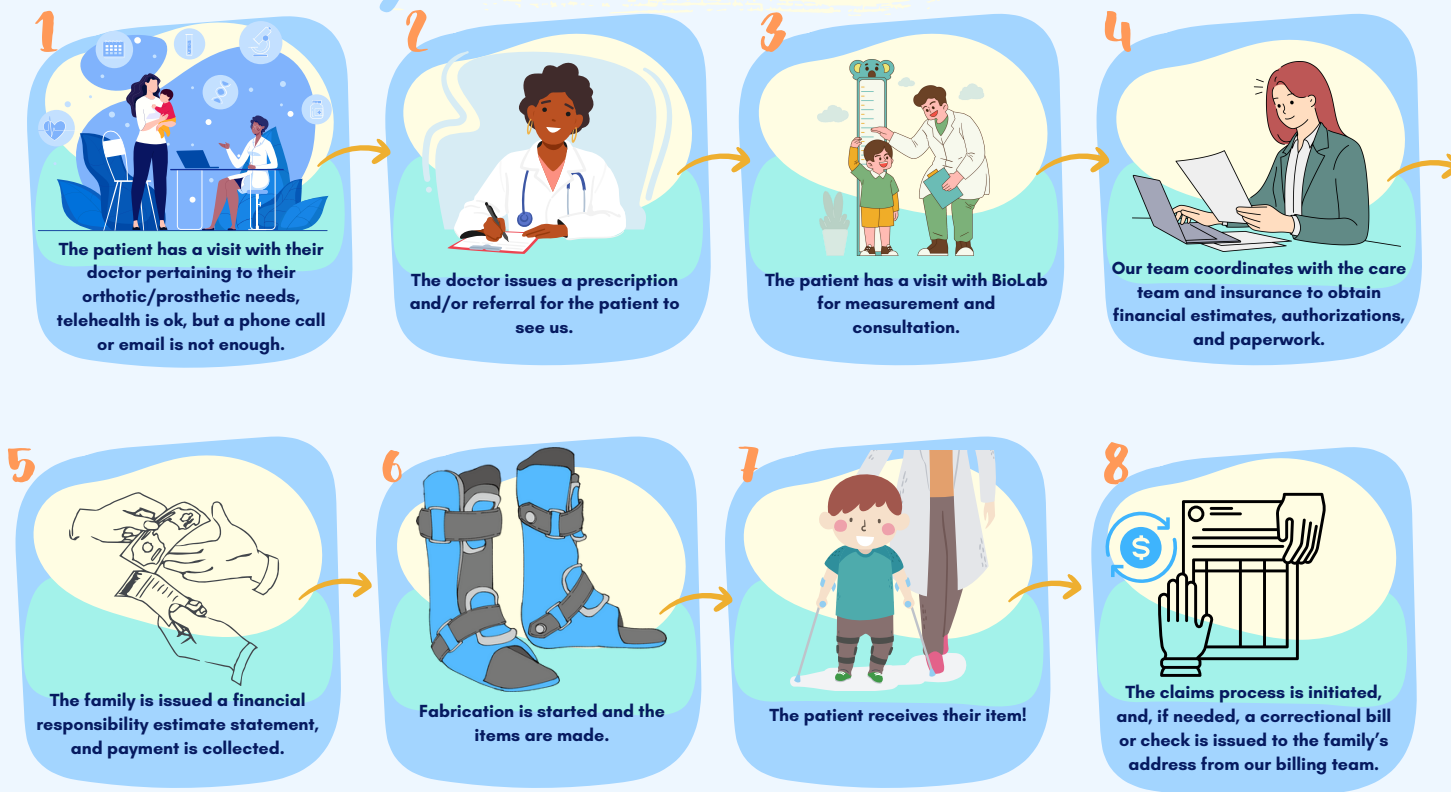


Our Process



What Will I Owe and How Will I Know?

We will contact your insurance (if you have insurance) and send you a message via email including a "Patient Financial Responsibility" form. If you have questions about the email, you are always welcome to contact us and we will do our best to explain. If you receive the Financial Responsibility form and cannot pay, please contact us for recommendations. In order for us to process your insurance correctly, you must present all forms of insurance coverage applicable to the patient at or before the consultation/measurement appointment. Failure to do so may lead to improper billing for which you will be at fault, resulting in big bills to your family—we don't want to do that!

We accept payment by: cash, check, or credit card. NOTE: Charges not covered by your insurance plan, as well as applicable co-pays, co-insurance and deductibles, are your responsibility. Returned check fee: \$45.00 or state maximum, if less. Credit Card fee: 4% of total amount charged.

For Services NOT Covered by Insurance

If you would like to receive any service not covered by insurance, whether it is excluded in your policy or if you do not have insurance, we require payment in full on or before the date of delivery. We will send you the financial responsibility form via email. We may require you to complete a document to state that you are agreeing to receive a non-covered service to prove that we have notified you that we have reason to believe that it is not or may not be covered by the plan.

If we cannot in good faith determine whether a service is covered, we may ask you to sign a document to indicate whether you would like us to proceed, and we may require payment in full on or before the delivery date. If your insurance covers the item and you have paid up front, we will reimburse you any overage beyond the allowed amount.

For Services Covered by Insurance

If you Have:	Your Financial Responsibility Will Include:	We Will:
Insurance We're In-Network With, including Medicare Part B, Medicaid, or Worker's Comp	"Patient Portion" deductible, co-pay, co-insurance on or before date of delivery.	Contact your insurance plan, Medicaid, Medicare, or Worker's Comp plan to find out your eligibility, benefit information and patient portion (if applicable), obtain prior authorization (if applicable) and notify you of your portion, and after delivery we will submit your insurance claim.
Insurance We're Out-of-Network With	Payment in full on or before the date of delivery, unless your plan agrees to pay us directly.	Contact your insurance plan to obtain your eligibility and out-of-network benefit information. Submit your insurance claim if your plan agrees to pay us directly.