



## Financial Policies

### Cash Patients

- Please be prepared to pay charges at time of service. Initial Pain Consultation is \$385. Initial Sleep Consultation \$250.

### HMO Insurance

- **HMO** insurance requires an authorization for treatment. **Please note most HMO Insurances authorize only one initial consultation.** Your Primary Care Physician's office will initiate this request.
- **On-going treatments must also be pre-authorized.** *If treatment is received without authorization, you will be responsible for the costs.*
- **Allow 5 – 7 business days for authorizations to be processed.**
- You may decline an unauthorized procedure or request that it be re-submitted for authorization. If authorized, it can be performed at a later date.
- Co-pays are due at each appointment.

### PPO Insurance

- **PPO** insurance does not usually require authorization for procedures. There are some exceptions, e.g. Botox Injections, MRI's & CT scans.
- If we are not a contracted provider for your PPO, we will bill your insurance one time only, as a courtesy. If your insurance denies the claim, you are responsible for payment and any appeals thereafter.

### Medicare Patients

- If you do not have a secondary insurance, you will be required to pay the 20% of charges not covered by Medicare. You are also responsible for your annual deductible.

### Uncovered or Partially Covered Procedures

- You are responsible for payment if procedures are not fully covered. Here are prices for **services frequently not completely covered.** Contact our insurance coordinator to discuss your financial liability.

TMJ appliance	\$1800	Quick Splint	\$100	Botox Injections	\$1500
Thera-byte Device	\$800	Stents	\$250	CPAP Trial	\$150

### CPAP Supplies

We are not contracted for supplies. We will refer you to a contracted provider.

I have read and understand this financial policy. I agree to pay the charges due at each appointment.

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_