**INSURANCE COVERAGE FOR YOUR SERVICES**

East Lake Acupuncture, LLC and its providers participates in a variety of health insurance plans. As a courtesy, we will do our best to pre-verify your coverage and bill your insurance for the services provided during your visit(s); however, it is your responsibility to know your policy benefits and limitations. Our billing agent is available upon request, to answer questions you may have regarding our billing procedures. Please be aware that costs for each session may vary, depending on procedures performed.

Since plan coverage is frequently updated, and providers contract (opt in-network) or leave a network periodically, we recommend checking with your health plan for current information about the coverage it provides for your choice of hospital, facility, provider, service, or procedure.

Some facilities do not participate with your health plan/insurance. They are called “out-of- network” providers or facilities. These providers or facilities can bill you the difference between what your insurer pays and the amount the provider or facility bills. You are responsible for these amounts.

**Please be advised that neither East Lake Acupuncture, LLC, or any of its providers are in network with your health plan.** If you choose to have us bill your insurance as an out-of-network provider, there are some things you should be aware of. We have outlined them below.

**WHAT THAT USING AN OUT-OF-NETWORK PROVIDER MEANS FOR YOU**

Under your health plan, you are responsible for certain cost-sharing amounts. This includes copayments, coinsurance, and deductibles. You may have additional costs or be responsible for the entire bill if you see a provider or go to a facility that is not in your plan’s provider network. These amounts are outlined in your insurance policy, which is either available online, or by calling your insurance company. We do not have access to this information.

We are willing to bill your insurance, using your out-of-network benefits, but please be advised that you may end up paying more, than if you paid our uninsured rate, using our time-of-service discount.

We cannot give you an estimate of how much you might owe, because health plans are either unable, or unwilling to give providers or facilities an estimate in advance. We will not know how much your health plan will cover until a claim is filed. They may apply your visit to a deductible, or apply part of your visit to a deductible, and pay for part. These factors are beyond our control. We will bill you for any unpaid balance.

**GAP COVERAGE**

A network gap exception is a tool health insurance companies use to compensate for gaps in their network of contracted healthcare providers. For example, if there are no in-network provider in an area, such as an acupuncturist, your health insurer may grant you a network gap exception, also known as a clinical gap exception. This gap exceptions allows you to get healthcare from an [out-of-network](https://www.verywellhealth.com/out-of-network-1738597) provider while paying the lower in-network [cost-sharing](https://www.verywellhealth.com/what-is-cost-sharing-1738709) fees. Anyone unable to obtain the covered services from an in-network provider may request a gap exception. If your insurance requires a letter of medical necessity in order to grant a gap exception, please submit a written request and allow ten (10) days. Fees may apply.

I, , have read the above notice and understand my financial responsibilities.

Patient/Guardian/Responsible party: Signature: Date:\_\_\_\_\_\_