



FEES AND PAYMENT POLICY

The following outlines our policy regarding fees, payment, and third party claim reimbursement. We are committed to providing excellent service at a reasonable cost and will attempt to make your experience as convenient as possible.

In general, expenses for snoring treatment are not reimbursed by insurance companies. All fees for services provided are due in full **at the time of service**. The Snoring Center **does not** contract with carriers of any sort or participate in any insurance plans and is considered an "out of network" provider.

New patient visits are defined as your initial consultation and are separate from treatments, such as the Pillar Procedure. The fee for new patient visits is \$50.00. If your carrier pays a benefit to The Snoring Center, the **amount paid** will be refunded to you in full. Please allow **thirty (30) days** from the **issue date of the insurance** check (not Internet notification) for us to receive and process your payment and to mail your check. Please do not call our office to request a refund prior to the thirty-day processing period. Doing so **will not** accelerate your refund. Please note that the insurance filing is not a substitute for payment. We do not provide ongoing claims tracking (e.g., follow-up, appeals, etc.). **You will be responsible for the status of your claim and for appealing any denial if you choose to do so.**

Please select from the following options to define how you would like The Snoring Center to assist you regarding insurance filings for treatments.

Option One:

As a courtesy, The Snoring Center will file a reimbursement claim on your behalf.

or

Option Two:

We will provide the documentation necessary for you to file your own claim.

By signing this form, I understand and agree to the policy and terms outlined above and have chosen:

<input type="checkbox"/> Option One	<input type="checkbox"/> Option Two
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Patient Signature

Date

Witness

Date