

# NONCOVERED PROCEDURES

Dear Patient:

Your insurance carriers are requiring your signature stating you understand that you are responsible for what your policy will not cover.

Administar Federal Medicare has notified us that certain procedures we do in our office are not covered under Medicare, such as removals of skin tags and some other benign lesions, because they are considered by the insurance companies to be not medically necessary. We have found this to be the case with other insurance companies such as Aetna, Humana, Anthem, etc. We are making you aware of this change to let you know that you will be responsible for procedures that are not covered by Medicare or other insurance companies that are performed in our office. We are very unhappy about the changes that Medicare and other insurance companies have made in this regard but feel we have no other recourse.

We are happy to file any insurance claims for our patients and will try to help whenever possible. We do accept monthly payments for the remainder of your bill.

Thank you for your understanding in this matter.

I understand that I am responsible for approved charges incurred whether my insurance pays or not, and cosmetic procedures not covered by insurance. I hereby authorize you to release any and all records pertaining to my care and treatment by Dr William M Parsley, MD, PSC. These are to include any operative reports, chart notes and lab results.

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Patient Signature

Date

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Patient's Printed Name

## ADVANCED DERMATOLOGY AND DERMAESTHETICS OF LOUISVILLE®

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