

Acknowledgement of Health Insurance Deductible and/or Co-Insurance

If your insurance plan has a deductible, your coverage does not start until the deductible has been met, and you will be financially responsible for your visit. If you have a co-insurance, you may be responsible for a portion of your visit, even if you have met your deductible. Your co-insurance is not the same thing as your co-pay and depends on your plan. You may be responsible for the office visit and all procedures performed during the visit, which may include but are not limited to:

- Office visit or follow up
- Skin cancer screening / full body skin exam
- Biopsies to check for skin cancer or to obtain a definitive diagnosis
- Shave removals to remove skin growths, moles, or to check for skin cancer
- Acne surgery (extractions) for acne, blackheads, milia, or clogged pores
- Incision and drainage of a cyst/abscess
- Cortisone injections for acne, inflamed cysts, scars, psoriasis, atopic dermatitis, or alopecia
- Cryosurgery (freezing) for warts, inflamed keratosis, actinic keratosis, or other skin growths
- Mohs surgery
- Excisional surgery
- Other procedures deemed necessary, advisable, or desirable to treat your skin condition
- Additional issues discussed or medical procedures performed during a cosmetic visit or suture removal
- You may also receive a separate bill from the pathology lab if a biopsy is performed

NOTE: All procedures performed during the visit will be a separate line item charge.

The fees are determined by your insurance company and specific plan, and not by our office.

NOTE: "Skin Cancer Screening" or "Full Body Skin Exams" are billed as a regular office visit and NOT considered free "Preventive Care"

This means that even if you have full coverage for preventive care, skin cancer screening or full body skin exam is not eligible as a free visit and it will be submitted to insurance as a regular office visit, including any procedures performed during the visit. This is a service generally covered by insurance, but if you have a deductible or co-insurance, you will be responsible for any fees and procedures associated with the visit. This is the policy of the insurance company and not by our office.

If you choose to refuse treatment, you may be asked to sign a waiver acknowledging that you have chosen to refuse care against medical advice.

My signature below indicates that I have read and understand the acknowledgement of deductible and co-insurance and understand that I am financially responsible for fees associated with the visit due to my deductible and/or co-insurance.

Patient Signature _____ Date _____