WAIVER

Splinting, Orthotics, DME and other Supplies

Notification to Patient

During your course of treatment with Anchorage Foot and Ankle Clinic LLC, you may require splinting, orthotics and/ or other DME (durable medical equipment) that are not a covered benefit under your insurance plan. Surgical shoe/removable casts will be billed to your insurance, they may or may not be a covered benefit.

If you receive orthotics, we will require a $100.00 down payment at the time of service. The down payment is non-refundable. We will then bill your insurance company for you. The fee for orthotics is $742.92, but we will never bill you more than $500.00. If your insurance only pays $500.00, we will do a courtesy write off of the remainder which is a self-pay discount after insurance. It is your responsibility to call your insurance regarding coverage. Custom fit orthotics are non-returnable and non-refundable.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have been informed by Anchorage Foot and Ankle Clinic LLC that the item(s) I may receive during my course of treatment may not be a covered benefit under my insurance plan. If it is not a covered benefit, I am responsible for payment of the supply item.

Patient (or guardian) signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\*Please be advised, you may or may not receive these supplies. This is only a waiver\*\*\*