



TOTAL HEALTH SLEEP SOLUTIONS, INC.

87 S. McLean Blvd., Suite B – South Elgin, IL 60177 – P: 847.888.8311 - F: 847.429.9334

Financial Policy

Patient Name _____ DOB _____

Insurance

Your insurance policy is a contract between you and your insurance company. As a courtesy, we will give you an estimated portion that will be collected for all treatment. All payments are due the same day services are rendered. As a loyal patient, you are responsible for any portion for which your insurance company does not pay.

Commercial Insurance

If you are prescribed an Oral Appliance, as a courtesy, we will request a verification of benefits including a PPO/GAP Waiver when available and file your insurance claim, however there is no guarantee of payment. We are not an in-network provider, nor are we contracted with any PPO or DMO plans. Some insurance policies require the patient to request a PPO/GAP Waiver. If this is the case, we will provide you the required documentation and information to do so. If approved, a PPO/GAP Waiver allows us, an out-of-network provider, to use your in-network benefits for a one-time procedure. We will do everything possible to maximize your insurance and minimize your out of pocket cost. Additionally, we will notify you when your insurance has paid, and inform you of any deductibles or unpaid charges.

If you are prescribed a PAP machine, we are unable to bill insurance for you; however, we do have several referral sources that may be able to bill insurance for you.

Medicare & Medicare Supplement

We are a participating Medicare provider and Medicare covers Oral Appliance Therapy for Sleep Apnea under Durable Medical Equipment (DME) at 80% of the allowed amount. We ask that the remaining 20% be paid to us by the time of delivery. If you have supplemental insurance in addition to Medicare, that policy may cover the additional 20%. In that case, we would collect the 20% coinsurance and reimburse you for anything paid to us by you that exceeds Medicare's fees after both Primary and Supplemental Insurance has paid. Additionally, we will notify you when your insurance has paid, and inform you of any deductibles or unpaid charges.

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Payment Methods & Financing Options

We accept cash and check. Please make checks payable to **Total Health Sleep Solutions, Inc.**

We also accept Visa, Master Card and Discover.

**All credit card transactions will be charged an additional service charge of 5%.

Dr. Bennardo prides himself on providing quality care and offers financing options to help make it affordable. Please see a Sleep Department team member for further details.

Past Due Accounts

In the event that your account should become delinquent, we reserve the right to use a collection agency to seek payment. If it is necessary to use a collection agency on your account, you will be responsible for all fees including the agency, attorney fees, and court costs.

By signing below, I acknowledge that I have read this Financial Policy and agree to the contents.

Signature _____ Date _____