

Robert Dickey Peterson, M.D. LLP, LLC Insurance

Our office will file your insurance claims for you for certain medical procedures. As a courtesy we will file claims for out of network insurance companies for certain medical procedures, but be aware that your deductible and out of pocket responsibility may be higher for not using an in network provider. The balance is your responsibility whether your insurance company pays or not.

Your insurance policy is a contract between you and your insurance company. We are not a party to that contract. If your insurance company has not paid your account in full within 60 days, the balance will automatically be transferred to you as the guarantor.

Please be aware that some, and perhaps all, of the services provided may be non-covered services and may not be considered reasonable and necessary under Medicare Program and/or other medical insurance. We will notify you of this and have you sign proper paper work.

Usual and Customary Rates

Our practice is committed to providing the best treatment for all patients and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

PHOTOGRAPHIC CONSENT

The following is my consent for Dr. Peterson or a staff representative to photograph me for the following purposes. *Using respectful and discretionary measures, the photographs may be viewed by medical health care professionals, as well as non-medical individuals.*

Patient's file Photographs are required for the patient's file and will be utilized for comparative review during the course of treatment.

Office reference These photographs may be used for educational purposes.

Internet The discreet use of photographs may be used exclusively on Dr. Peterson's educational website.

By signing, I am granting Dr Peterson permission to use my photographs as checked above.

Date

Signature