

**Making Your Health Our First Priority** 

15160 NW Laidlaw Road, Suite #224

Portland, Oregon 97229

Phone: 503-922-7267

Fax: 678-792-9439

Dr. Meenakshi Aggarwal MD, FAAFP

Patient Name:

company.

## PATIENT RESPONSIBILITY NOTICE WAIVER FORM

Beyond Health LLC (Family Practice and Skin care clinic) provides many different types of medical services including exams, labs, minor surgical procedures, testing, and general medical care.

companies that do not cover certain type of procedures and medical care.
Our staff makes every effort to assist you in understanding your medical health benefits. However, it is impossible for us to know all the policies for all the many insurance plans available. Therefore, we are providing this notice to inform you of the following responsibilities as they relate to benefit coverage and payment responsibilities by the patient and Beyond Health LLC
Beyond Health LLC Responsibilities:
Beyond Health LLC (also referred as Family medicine and skin care clinic) is not responsible for knowing what services are covered by the patient's insurance plan and is not responsible for informing the patient whether a particular service is covered. Beyond Health LLC will assist the patient in obtaining payment from his/her insurance company by submitting the necessary insurance claims.
Patient's Responsibilities:

By signing below, I hereby acknowledge and understand my responsibilities as a patient of Beyond Health LLC Family practice and skin care clinic and accept that the clinic is not responsible for knowing my medical insurance benefits for services provided.

It is the patient's responsibility to know and understand his/her own medical insurance benefit coverage and limits. The patient is ultimately responsible for payment for all services rendered by Beyond health LLC, and the patient must pay for any services not covered by the patient's insurance

Date:

(patient or patient's representative)