

Lake Obstetrics and Gynecology, Inc.

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Dear Patient:

Due to the many changes in insurance policies, it is no longer an easy task to interpret each individual policy. Although we try to stay aware of these changes, it is not always possible.

Therefore, we urge you, to please check with your insurance company prior to any testing or surgery being performed. **It is your responsibility to know your individual coverage.** Failing to comply with this suggestion could result in you, the patient, being responsible for all cost incurred.

Please remember, your insurance policy is between you and your insurance company and **not with your insurance company and your doctor.**

SIGNATURE _____

DATE _____

WITNESS _____

DATE _____