



# Affiliates for Women's Health

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Insurance companies divide medical services into:

- (1) "covered" services and
- (2) "non-covered" services

Even if a "covered" service is provided it may not meet the insurance companies definition of "medically necessary" or may fall outside "utilization review" payment parameters; the result would be no insurance benefits for the service provided.

You are financially responsible for payment of "non-covered" services and/or payment of "covered" services in which payment is denied.

\_\_\_\_\_  
Patient Name (print)

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

I consent to release of my medical records to my insurance company or designee:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date