## Orthopedic Arts



## Statement of financial responsibility

Orthopedic Arts Laboratory, Inc. appreciates the confidence you have shown in choosing us for your rehabilitative needs. The service you have elected to participate in implies a financial responsibility on your part. This responsibility obligates you to ensure payment in full of your fees. As a courtesy, we will verify your coverage and bill your insurance carrier on your behalf. However, you are ultimately responsible for the payment of your bill.

You are responsible for payment of any co-payment, deductable or co-insurance as determined by your contract with your insurance carrier. You are responsible for any amount not covered by your insurer.