

Dr. Susan Schwartz D.O.

8985 S. Pecos Ste. 3b

Henderson, NV 89074

Dear Patients,

Due to the enormous changes in healthcare and the multitude of plans being offered, this is a gentle reminder to be aware of your insurance prior to being seen.

If you are unsure, we ask that you phone the customer service number on your insurance card. This will avoid any unnecessary expenses on your part.

LABORATORY

____ CPL ____ LMC ____ Lab Corp ____ other

RADIOLOGY

____ West Valley Imaging ____ Red Rock Radiology ____ Steinberg
____ Desert Radiology ____ Pueblo Medical ____ Insight Imaging
____ Nevada Imaging Centers ____ Diagnostic Imaging of S. NV ____ other

PHARMACY

Pharmacy: _____

Address or Cross Streets: _____

Phone Number: _____

By signing below, I acknowledge that any statements generated from the above providers are solely my responsibility.

Printed Name: _____

Signature: _____

Date: _____