

NOTICE

Notice to Patients regarding Use of Quest/Solstas Diagnostics

This notice is to inform you that we use Quest Diagnostics/Solstas here on site for any laboratory/blood work. These are separate entities and are not associated with Primary Medical Care. Each patient is responsible for checking with his/her insurance plan to see if these services are covered under his/her insurance plan. You are not obligated to use Quest Diagnostics/Solstas for your labs but if you choose to do so, you may receive a separate bill from Quest/Solstas for any non-covered services.

All billing questions must be directed to these companies.

I have read the above notice and understand that Quest Diagnostics/Solstas are separate entities and that I am responsible for my deductible, copays, and any non-covered services. I understand that I may receive a bill from Quest/Solstas .

Patient Signature _____

Date _____