



INSURANCE INFORMATION FOR SURGERY PATIENTS

When the patient has been scheduled for surgery our office will call your insurance company to preauthorize the procedure. It is the policyholder's responsibility to check his/her insurance policy or call the insurance company to verify benefits or to verify that a second surgical opinion is not required. If a second surgical opinion is required, it is the responsibility of the patient/parent to arrange it with another physician. Our physicians nor your primary care physician can be used as a second opinion.

If the patient is covered by Optimum Choice, MD IPA or Medallion Medicaid our office will contact your primary care physician for the surgical referral form.

If the insurance company determines that the charges will not be covered or will be applied to the deductible, we ask that a payment of half be made at the time of the pre-operative appointment. The patient is responsible for any co-insurance or deductible amount that is determined to be applicable by the insurance company. Our physicians fees are standard and we would be happy to give these to you. Exceptions to these standard fees would be surgical removal of lesions and repair of lacerations, which vary according to size. Please keep in mind that the physician's fees are separate from the hospital and anesthesia fees. The number to call for an estimate of the hospital's fees is:
Physician Referral 349-0588.

If the patient is to have cosmetic surgery, the total cost of the surgery is due at the pre-operative appointment. If the patient is to have functional surgery and cosmetic surgery at the same time, the charge for the cosmetic aspect of the surgery is due at the pre-operative appointment. We will bill the insurance carrier for the functional aspect of the surgery and we will handle this as any other type of surgery as stated above.

The first visit following the surgery is considered post-operative and is included with the payment which we receive for the surgery. After that initial post-operative appointment, a charge may or may not be billed to you insurance company depending on what is performed during the visit that day. A patient's copay may or may not apply to these charges, this will be determined by your insurance company.

If you have any questions, please do not hesitate to call us. Our office would be happy to speak with you and answer any questions which you may have.