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### Office and Financial Policies

We would like to thank you for allowing us to provide your healthcare needs.  
Please read all of our office and financial policies and sign below.

- A valid insurance card and photo identification (e.g. drivers license) are required for all new patients and are necessary for filing for your insurance. If these documents are missing you will be asked to reschedule your appointment.
- Please provide us with information on all insurance plans for which you are covered. If your insurance company does not pay due to your not providing us with insufficient and/or timely information, you will be responsible for the difference in payment.
- Referrals: you should know whether your insurance requires a referral and, if needed, obtain one prior to scheduling an appointment. Referrals typically have an expiration and an allowed number of visits.
- Copayments, coinsurance and deductibles are due at the time of your visit. These fees are calculated based on our best efforts. Any differences will be charged or refunded to you. Failure to pay your copayment at the time of your visit will incur a \$20 billing surcharge.
- Your insurance plan's benefits may change from time to time. It may not cover something that was covered the last time you saw your physician.
- You are responsible for providing any changes of address, telephone numbers and/or insurance information whenever such occurs.
- You are responsible for responding promptly to requests from us or your insurance company to provide any additional information required from you. Any claims unpaid due to your failure to provide timely information will become due from you and payable in full immediately.
- Procedures (e.g., treatment of warts, injections etc.) considered "surgical procedures" by insurance companies and the fees for these services may require a separate surgical deductible, copayment or coinsurance.
- Pathology and laboratory fees are separate and are billed by the laboratory performing the services.
- We request that you call our office at least 24 hours prior to your appointment if you must cancel or reschedule your appointment. We reserve the right to charge a \$50 fee for missed appointments.
- Your account will be charged \$35 for each returned check. We request you pay this fee plus the face amount of the check in cash. You may be asked to pay in cash for future visits.
- Past due accounts will be turned over to a collection agency. Any collections fees, legal fees or attorney's fees will be added to the amount you owe.
- Fees for medical records will be charged as allowed by law. Please give 2 weeks for such requests.
- Medication refills: medications are not renewed over the phone, fax or mail. Please ask for all refills at the time of your visit.
- Your credit card information provided us at your time of visit will help us reduce billing costs.
- People accompanying the patient: we cannot consult or treat anyone who does not have an appointment in their name. Medically/legally we must have a chart if a medical opinion is rendered. If the person is currently a patient, it would be improper to render consultation time without an appointment.
- Photos may be taken for medical or educational purposes.

I have read and I understand the policies outlined above and I agree to abide by them.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Patient's Name

\_\_\_\_\_  
Signature of Patient or Guardian