OFFICE & FINANCIAL POLICIES



NEUROTEST OF NEW YORK MEDICAL PLLC

INSURANCE INFORMATION

- It is your responsibility to verify with your insurance company that our physicians are "in-network" with your specific plan. Due to the increasing complexity of insurance plans, we require you to contact your insurer's Member Services for information on your coverage and out-of-pocket costs. Your insurance plan is the best place to find information on your medical cost responsibilities.
- We will verify eligibility and benefits for you, but this is not a guarantee of payment. Please provide your complete insurance information at the time of scheduling so we have ample time to verify your benefits. A copy of your current insurance card is required to provide proof of insurance.
- If you fail to provide us with the correct insurance information in time to meet your insurance company's claim filing limit, you will be responsible for any charges not paid by your insurance.
- Co-payments, co-insurance, deductible, non-covered procedures, and services considered "not medically necessary" by your insurance plan must be paid at the time of service. An additional \$25 fee will be added to your account if you are not able to pay your co-payment on the day of your appointment or it may have to be rescheduled.
- If a referral from your primary care doctor is required by your insurance plan, we must receive it 48 hours prior to your appointment or it may be canceled.

UNINSURED and OUT-OF-NETWORK

- Full payment is required at the time of the visit.
- Affordable self-pay fees with prompt payment discounts are available upon request.
- We can provide you with a receipt (Superbill) of medical services rendered so you can submit a claim to your insurance company.

CLAIMS SUBMISSION

- We will submit your claims and assist you in any way we reasonably can to help get your claims paid with the insurance information you have provided us.
- Please be aware that the balance of your claim is your responsibility whether or not your insurance company pays your claim.
- If your insurance company does not pay your claim in 90 days, the balance will be billed to you.

NON-PAYMENT

- If your account is over 30 days past due, a reminder statement will be mailed to you.
- Outstanding personal balances older than 60 days (from the date of service) are considered delinquent and will be transferred to our collection agency.
- A single phone call will be made 3 days prior to transferring the account to the collection agency to the phone number on file. Any collection fees incurred and collection agency charges will be added to your account.

NO-SHOW/LATE CANCELLATION FEE

- We require at least 24-hour notice for all appointment cancellation/rescheduling or a \$50 no-show fee will be charged to the credit card on file.
- After 3 missed appointments without proper notice, we reserve the right to discharge a patient from our practice.
 However, we will be available for medical emergencies up to 30 days from the time of discharge.
- If you arrive more than 30 minutes late for your appointment, we will try our best to accommodate you at the discretion of our physician. You may be subject to a \$50 no-show fee and your appointment may be rescheduled.

FOLLOW-UP VISITS

You will be required to have an appointment at appropriate intervals for review of results, review of your medical condition, and management of medication. These appointments may be tele-visits or in-person at the discretion of the physician.

PRESCRIPTION REQUESTS

- Medications are prescribed in sufficient quantities to last until your next scheduled visit.
- Prescriptions of controlled substances may require a physician visit.
- Routine refill requests will not be addressed after-hours, on weekends or holidays.
- If you need an emergency refill and it is a weekend or holiday, there will be a \$50 emergency prescription fee to contact your pharmacy outside of normal business hours. We strongly encourage you to monitor your medication consumption and plan ahead.
- Please allow up to 48 hours to process routine refill requests submitted Monday through Friday.
- Subsequent refills will require an office visit for medication management.

COMMUNICATION POLICY

- In the case of emergencies or life-threatening symptoms, please call 9-1-1 or visit the Emergency Department.
- For simple questions (i.e. appointments, office hours, yes/no answers), we encourage you to email us or use our patient portal.
- A doctor follow up is required for all other complicated questions (i.e. medication management/adjustments, side effects requiring a different medication, test results, new symptoms).
- We try to answer every phone call to the office immediately but sometimes we may be assisting another patient. You can leave a voice mail or email us and we will get back to you within 24 hours.

PAYMENT

We accept all major credit cards and HSA. We do not accept checks. For your convenience, online bill pay is available on our website www.neurotestny.com.

CREDIT CARD ON FILE

We require a credit card on file to cover deductibles, co-insurances, co-pays, and in some cases denial of medical payment by your insurance company.

REGISTRATION FORMS

To avoid prolonged in-person contact due to COVID 19, please submit your registration documents within 48 hours of scheduling your appointment. This allows us time to verify insurance and collect additional medical information prior to the visit.

FORM FEES

All forms and letters are charged at an additional fee ranging from \$50 to \$150.