

## \*\*\*REFERRAL PROCESS - PLEASE READ\*\*\*

It is the Patient's responsibility to understand and comply with their insurance policy requirements. If needed, please contact your insurance company, by calling member services, for a copy of their guidelines. Their telephone number is located on the back of your insurance card.

## **SPECIALIST APPOINTMENTS**

In the event that your insurance company requires a Referral/ Authorization to see a Specialist, please contact our Referral Coordinator once the appointment has been made.

Our office will obtain the authorization from your insurance company prior to your scheduled appointment date/time.

With the exception of an emergency, our office requires that you provide us with at least five (5) calendar days' notice of your appointment to obtain the Referral/Authorization.

## DIAGNOSTIC PROCEDURES ORDERED BY YOUR PCP

Our Medical Assistants will obtain authorization from your insurance company for procedures ordered by your Primary Care Physician. We will contact you by telephone once the authorization has been obtained.

Do not make an appointment for the procedure until authorization has been obtained.

## THIS FORM IS NOT A REFERRAL/AUTHORIZATION