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Lab, Office Visit Referrals & Precert For Testing

REFERRALS: Please be advised many insurance companies, such as United Healthcare and BCBS (BEG contracts), require a referral for an office visit to the doctor. **You should be aware of this already and you should have already had the opportunity to pick a primary care physician when chose your coverage.** If you did not pick a primary care physician, then one would be assigned to you.

It is the patient's sole responsibility to obtain a referral prior to your appointment from your set Primary Care Physician. **If you do not have a referral then your insurance carrier will reject the charges for that day's services and you will be 100% responsible for full payment.** This is outlined for you in the insurance benefits plan you agreed on with your insurance carrier. Referrals have a start date, expiration date and number of visits.

Referrals may not be able to be obtained at the time of service, so please make sure your referral is in place prior to your visit. If you do not have a referral your office visit will be rescheduled. If you are having an emergency, and you feel you must see a doctor, we will direct you to the nearest emergency room.

If you are not sure if your insurance now requires a referral please contact the telephone number on your insurance card for questions. Some of the companies now requiring referrals are, but are not limited to: **BCBS, AARP, United Healthcare, Medicare Complete, Senior's First, and Tricare.**

PRECERTS: Certain drugs and testing performed in our office may require a precert. Please verify you do not require a precert when receiving a treatment or being scheduled for outpatient testing.

LAB: We ask you also be aware your insurance provider may require all lab tests be sent to a certain laboratory provider such as Quest, LabCorp, AEL, etc. If you must use a certain lab please alert our triage person at the time your blood is drawn. **Lab sent to an out of network lab will result in a higher out of pocket cost to you.** To have the lowest additional and unexpected costs we ask you to know your coverage and when in question call your insurance provider.

I have read the above statement and understand.

Patient Signature

Date