



## **Administrative Policy and Associated Fees**

As a courtesy to our patients, our Physicians have chosen to remain contracted with most insurance companies. In order to maintain these contracts, we will be collecting the following fees from our patients as they are applicable.

All the fees are listed below and are due at the time the services are rendered.

- Appointment Cancellation Fee** **\$50.00**  
We ask that all appointments be cancelled within 24 hours. Failure to notify our offices within 24 hours will result in a \$50.00 charge.
- Scheduling of outside referral appointments** **\$35.00**  
Occasionally a patient may be referred to have additional testing, imaging and or studies at an outside facility. If this occurs and the patient requests that our nursing staff schedule these appointments on their behalf, there will be a \$35.00 charge.
- Completing Forms/Request for Letters** **\$50.00**  
In the event that a patient requests that the physician complete any forms for an outside agency or write a letter on behalf of the patient regarding his or her care, there will be a \$50.00 charge.
- Surgery Administrative Fee** **\$100.00**  
Prior to reserving a surgical date, a \$100.00 non –refundable administrative fee will be collected. This fee covers the time and efforts associated with scheduling, confirming and coordinating your surgery, verifying insurance benefits and obtaining any necessary authorizations.
- Surgery Center Deposit** **\$500.00**  
In the event that you are scheduled for surgery at our Ambulatory Surgery Center, IE Surgical, Inc, please note that a **non-refundable deposit** of \$500 is required to secure your surgery date. This amount will be applied towards any surgery fees should your surgery take place. In the event that you may need to reschedule your procedure, this amount will be held as a credit for a future surgery date. In the event that you must cancel your surgery, please inform our office within 10 business days otherwise your deposit will no longer show as a credit on your account.
- Requests for Copies of Photographs** **\$25.00**  
Any requests for copies of patient photos that need to be converted to CD will be subject to a \$25.00 charge.
- Chart Storage Retrieval Fee** **\$30.00**  
Our office only keeps medical records for the last two years. All other records are sent to storage. If your records need to be retrieved, there is a \$30.00 fee. That is due at the time services are rendered.

I have read and understand the Osborne Head & Neck Institute’s Administrative Policy and Fees, and further understand that these fees are my responsibility and I agree to pay such fees if applicable.

\_\_\_\_\_  
Patient’s /Parent or Guardian Signature

\_\_\_\_\_  
Date

