

4

Associates in Internal Medicine, P.C.
241 East 86th Street Suite 2D, New York, NY 10028
234 Central Park West, New York, NY 10024

Managed Care Acknowledgement

Oxford Health Plan is the only managed care plan we participate in at this time, however, this policy will apply to any future managed care plans we may opt to enroll in. Oxford specialist may register on www.oxhp.com to obtain and process referrals. It is important that you do not make an appointment to see a specialist until your primary care physician has approved your referral request and an authorization number has been generated. For your convenience, we have set up an online "RENEWAL of Referral" request on our website, www.aimdocs.net. Our referral coordinators will process all approved referral requests within 72 business hours of receipt of approval from your physician. If your PCP deems that your request is urgent, they will instruct the referral coordinator to process your referral on a same day basis. Many referral requests are for conditions that can easily be treated by your PCP. If this is the case, we will gladly give you an appointment to be treated for your medical condition.

HMO plans have adopted a computerized referral system that generates a unique number for each referral request. Referrals are not processed in our office and due to the HMO's website format, referrals cannot be backdated or faxed. The patient or the specialist may check the status of the referral on the insurance plans website or by calling the insurance company. Please be advised, that the specialist can hold you responsible for any costs that are incurred if you do not have a referral and your plan entitles you to out-of-network benefits. If your specialist accepts your insurance then they are aware that they should not schedule an appointment for a patient without obtaining a valid referral number.

Once your PCP has provided you with an authorization to a specialist, that specialist is allowed to authorize visits to other physician(s) related to their specialty or for diagnostic testing. Since the specialists are more informed about the patient's specific condition and needs once they evaluate them, we do not authorize diagnostic and/or any other visits the they are allowed to do without our assistance.

We recommend that you contact your insurance carrier if you have any questions regarding the referral guidelines for your particular health plan.

I, the undersigned, have read and understand the referral request policy of Associates in Internal Medicine, P.C..

(PATIENTS SIGNATURE)

(DATE)

(STAFF, PLEASE PRINT THE PATIENT FIRST AND LAST NAME)

(DATE)

(SIGNATURE OF WITNESS)

(DATE)