

BRANDYWINE
FAMILY FOOT CARE P.C

Podiatric Medicine and Surgery
Dr. Vincent J. Pongia, Jr.
Dr. Kevin J. DeAngelis
Dr. Stephen S. Soondar

OFFICE POLICY

Welcome.....and thank you for the opportunity to provide you with our medical service. We want to make your visit here as pleasant and comfortable as possible. To better serve you, we have prepared the following summary of our policy. Please take a few minutes to read the following information and sign the back of this form where indicated.

Financial Concerns

In general, this office participates in most insurance plans as well as a limited number of managed health care plans and health maintenance organizations (HMO's). Medical services are to be paid for at the time service is rendered unless other arrangements are made in advance. Our billing service will submit covered services to those insurance companies in which we participate.

HMO PLANS

The Following guidelines apply for patients enrolled in health maintenance organizations (HMO's) that require referrals prior to office services:

All HMO patients are responsible to have a valid referral for the date of service for which they are to be treated.

In accordance with HMO guidelines, anyone without a referral will be held financially responsible for that service. Please be aware this it is not responsibility of this office to inform patients as to the intricacies of how their insurance programs work. We also cannot be responsible for keeping track of patient referrals.

In accordance with HMO guidelines, **NO PATIENTS WILL BE SEEN WITHOUT A REFERRAL** unless other arrangements have been made in advance to satisfy the financial obligation for the services rendered.

CO-PAYMENTS

All co-payments (co-pays) must be paid at the time of service. No service will be rendered until the office co-pay has been satisfied. An \$10.00 process fee will be assessed if it is necessary for the office to bill for co-payments.

MISSED APPOINTMENT: PLEASE READ THIS CAREFULLY!!!!

Please be aware that this office is a very busy office. Appointments are frequently made weeks in advance for patients. It is expected that the patient either keeps those appointments or notified the office 24 hours in advance. This office does have a policy of charging \$45.00 per visit in the event that an appointment is missed without 24 hour notice. This policy applies to all patients, including those with HMO contracts. Also, please note we do not call to remind patients of appointments.

Please understand that the purpose of this policy is not for the financial gain of this office. We have established this policy in order to provide maximum opportunity for all patients to gain access to this office.

SURGICAL SCHEDULING

There are many patients who require scheduling of either office or operating room surgery as part of their overall treatment. When patients schedule surgery, this office must set aside large blocks of surgical time throughout the week to accommodate the surgical needs of our practice. To avoid wasting this surgical time, it is imperative that we establish guidelines for cancellation of operative procedures.

As such, it is expected that any surgical patient notify this office within 3 business days prior to their scheduled surgical time to either re-schedule their surgery time or cancel their surgery .Failure to do this will incur a \$350.00 charge that must be satisfied regardless of insurance coverage.

BILLING OFFICE

In the event you should receive a bill from Brandywine Family Foot Care, Please call the PMA Billing office at 610-917-9281. Please be advised your billing question will be handled in a timely manner.

We are committed to providing you with the very best podiatric medical and surgical services available. We maintain 24 hour coverage and can be contacted either here in the office or through our answering service. It is our pleasure to be of service to you.

WELCOME TO BRANDYWINE FAMILY FOOT CARE!

Please Sign Bellow:

Patient Signature: