

*****IMPORTANT INFORMATION REGARDING YOUR APPOINTMENT*****

Please plan to arrive at least 20 minutes prior to your appointment time for final registration and nursing assessment.

Have your insurance card(s) and legal picture IDENTIFICATION (*valid Driver's license -or- state ID -or- passport*) with you on day of appointment. They are REQUIRED at EVERY visit; they will be SCANNED into our system for reference, and maintained as part of your HIPAA-secure medical record.

- **For minor patients and/or those who have a Legal Guardian or Active Power of Attorney, the legally-responsible person must accompany the patient and present their valid legal ID and documents proving that authority.**

If you are enrolled in a network insurance plan (HMO), it is your responsibility to obtain a referral for ALL visits with us, and the referral must be available at the time of your visit(s). Please contact your primary care physician for this. Referrals may be faxed to us at 586-228-8830

The doctor will need to review any IMAGING DONE REGARDING THE REASON FOR YOUR VISIT (CT SCAN, MRI, ULTRASOUND, MAMMOGRAPHY, ETC.)

- **If those studies were performed at McLaren Macomb Hospital, we will access images, electronically.**
- **If imaging was done at *any other* facility, YOU ARE REQUIRED TO OBTAIN THOSE IMAGES ON DISK & FORWARD that disk & corresponding report to our office PRIOR TO your APPOINTMENT.**

\$\$\$ Your OFFICE VISIT CO-PAY is due at the time of your visit & will be collected when you check-in. Please be prepared to make this payment ~ cash, check, and credit/debit cards are accepted. If you are unable to pay your OFFICE VISIT COPAY, your appointment will be rescheduled. [On the advice of our banking institution, WE DO NOT ACCEPT BILLS LARGER THAN \$50]

*****If you are unable to keep this appt, please notify us as soon as possible so we may offer this time to another patient.**

*** APPOINTMENTS MUST BE CANCELLED BY 12NOON OF THE PREVIOUS BUSINESS DAY TO AVOID A \$100.00 NO-SHOW FEE.**

Thank you!



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