



**BRUCE E. FREEDMAN**  
M.D., F.A.C.S.

Dear Patient,

Due to all the various HMO and PPO insurance plans now available in the marketplace, it has become a very complicated process to become familiar with each plan. All of the various companies and plans have individual requirements for various procedures.

It has, therefore, become necessary to request all patients provide all information needed from their insurance company, You must assume responsibility for providing all information to our office and to any other healthcare facility involved in your care, including hospitals. Patients must notify their insurance company of any changes in their care or treatment so that proper handling and payment will be made by insurance company on your behalf.

We emphasize again, your insurance is a contract between you and the insurance company, NOT between you and Bruce E. Freedman MD, PC. All co-pays for office visits are due at time of service. We have always filed and will continue to file claims on your behalf, but you must share equal responsibility for obtaining and giving our office the proper information for timely payment.

Patients may receive a pre-certification or authorization for services, but please remember this not a guarantee of payment It is YOUR responsibility to call the insurance benefit department to verify coverage.

We realize that patients are not always given all the information required by their insurance company. It is still your responsibility to call and obtain benefit information before receiving treatment. You should have and know all the information required by your individual plan to avoid any confusion about services covered.

Upon completion of insurance claim, any non-covered services will be YOUR financial responsibility.

We are requesting your cooperation so we may better serve you and your healthcare needs.

Thank you for your cooperation.

Susie Freedman  
Practice Manager

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Patient Signature

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Date of Birth