

NOTICE: To All NTJC Patients With Medicare Insurance, With or Without Supplemental – If You Need *Remicade, Hyalgan, Synvisc, Orthovisc, Supartz* or any Injection/Infusion Series

**Effective Immediately** (POLICY DATE August 21, 2002, updated 09/12/2005)

Dear \_\_\_\_\_ :

Due to financial considerations, we reserve the right to collect your coinsurance portion of the Medicare approved payment ('Allowable') at the time of service for these injectable or infusion medications. The fee allows for all directly associated procedures including the office visit with the doctor. This will be approximately \$\*\*\*\*\***397.73 for Remicade** (based on 3 vials), and **125.00/190.00/190.00/\*\*\*\*\*.00 for Synvisc/Hyalgan/Supartz/Orthovisc, respectively** (based on 2 knees/bilateral injection, with arthrocentesis, local anesthetic, and Physician evaluation). Prices are subject to change without notice, as federal administration may change the 'Allowable' provider reimbursement, re-computed each calendar quarter for Injectables.

As a courtesy, we will provide itemized insurance billing for those who have Supplemental/Secondary insurance coverage, and we will refund any and all overpayments due back to the correct party.

Your account must be current (zero balance) for these major expenses in order to proceed to the next scheduled treatment; **please do not start any of these therapies** with us if you cannot cover the patient coinsurance portion at the time(s) of service.

Thank you for your cooperation. Best regards.

North Texas Joint Care, P.A. (Management)

Signed: \_\_\_\_\_ ; Patient: \_\_\_\_\_  
(Responsible Party/Parties)

Printed: \_\_\_\_\_

Date signed: \_\_\_\_\_

\*\*\*\*\*Not yet determined by Medicare.