

IVF FLORIDA
REPRODUCTIVE ASSOCIATES
(954) 247-6200



Wayne S. Maxson, M.D.
David I. Hoffman, M.D.
Steven J. Ory, M.D.
Marcelo J. Barrionuevo, M.D.
Vanessa N. Weitzman, M.D.
Gene F. Manko, M.D.
Daniel R. Christie, M.D.
Marc R. Gualtieri, M.D.
Laurice Bou Nemer, M.D.

Financial Policy

We are so pleased that you have chosen our practice as your partner for this important journey. We recognize that the investment you make in treatment is significant from both an emotional and financial perspective. As your treatment provider, we want to assure you that IVF Florida Reproductive Associates strives to provide optimal patient care in a fiscally responsible manner. While each patient's journey is unique, certain financial policies are critical to ensuring consistent support and clarity for all patients seeking treatment.

Insurance Policies

We are a participating provider with many insurance carriers, and we will file claims on your behalf if services are a covered benefit. You will be responsible for non-covered services and any services beyond your benefits maximum. If you have dual coverage, and we do not participate with your primary insurance, the practice reserves the right to request that services must be paid in full at the time services are incurred. We will provide the documents you need to file for reimbursement with your insurance company,

You must also advise us when your insurance information changes prior to the time of service. This is important because insurance companies often have time limits for filing claims and obtaining authorizations. Therefore, if you fail to notify us you may lose important benefits because we cannot file claims to your new insurance if it is outside your new insurance company's timely filing limits. Treatment may have to be placed on hold if your insurance changes and we are not advised. If your coverage changes under your new insurance, you will be financially responsible for services rendered that are not covered under your new insurance, even if such services were covered under your prior coverage.

Insured patients should read their policies carefully to become familiar with their infertility benefits and limitations. Your financial counselor will help guide you through the insurance process and help you obtain benefit information. Most infertility insurance policy coverage is based on an annual or lifetime benefit maximum. We encourage you to independently confirm the exact extent of coverage, if any, with your insurance carrier. The practice assumes no responsibility for representations made by your insurance company. It is important that patients understand that any coverage provided by insurance is usually designed to reduce patient cost, not eliminate it. While we are here to assist you in working with your insurance company, ultimately *you* are responsible for the full resolution of the full amount of your bill, regardless of insurance coverage.

Unfortunately, we cannot provide you with a guarantee of coverage. Claims must be submitted and reviewed by the insurance carrier prior to any payment. Any claims denied by your insurance company may become your responsibility for payment. If the insurance company requires additional information from you, and you do not respond to the insurance company within 30 days, you will be responsible for outstanding charges.

Many insurance companies require referrals and/or pre-authorization to cover treatment. In such case, if you wish to utilize your insurance coverage, treatment can only begin after we have obtained the necessary pre-authorizations and/or referrals. If you would like to start your treatment without authorization/referral, full payment is required and a waiver must be signed. Please ask for estimated treatment costs.

For our patients insured by a company with whom the practice has no contract ('non-participating'), payment for all services is required at the time of service. If you have a PPO plan and have benefits for infertility services, we

