

RYAN

Family Medicine

Non-Covered Services

The following services are considered “Non-Covered” by most insurance companies.

The fees listed below must be paid at the time of service.

- **Returned checks:** If your check is returned to us for any reason, you will be charged \$30
- **Missed appointments:** If you fail to notify us at least 24 hours in advance that you will not be able to make your appointment, we may charge you \$40. Should you receive a bill for missed appointment / late cancellation and feel it is in error, please contact the billing office.
- **Administrative fee for new patients:** The \$40 fee for new patients is due at time of scheduling. Once established, this fee will be refunded or credited to your account. It will be forfeited in the event of no-show or late cancellation.
- **Forms completion:** Disability, Insurance Forms, Travel Forms, Release from Work, Prior Authorizations, and other forms are not required by all insurance plans or employers. If required at a time other than at an office visit, there may be a \$25 charge.
- **Mailing of prescriptions or other items:** routine prescriptions are generally filled during appointments. Our mailing fee for these and other items is \$25.
- **Paper records:** We will provide to you, upon written request, a paper copy of your medical record. We charge a base fee of \$10 plus \$0.75 per page. This fee applies to copies of lab and other medical reports obtained at a time other than an office visit.
- **Electronic records:** Upon written request, if you would like a copy of your medical record on CD, we charge a base fee of \$10, plus you must provide us with a formatted, writeable CD
- **Web Visits:** \$45. If your visit results in a visit within 24 hours, the fee is waived.
- **Phone visits:** If you request medical services via telephone instead of a visit to our office, the following fees apply. You must be an established patient to request this service. Phone visits are done only by prior physician approval and scheduling. If the phone visit results in an office visit within 24 hours, you will be refunded, per Federal insurance guidelines.
- 5-10 minutes: \$45 11-20 minutes: \$85 21-30 minutes: \$125
- **Late fees:** Invoices not paid within 60 days will result in a \$5 per month late fee.
- **Co-pay collection fee:** If we must bill you for your co-pay, you may be required to pay a \$20 Co-pay Collection fee.
- **Acupuncture:** Pro-rated based on hourly rate of \$300 / hour.

411 New Karner Road in Albany, NY 12205

Ph 518.608.6329 • Fax 518.608.4039

www.DrJeffRyan.com • Info@DrJeffRyan.com