

## *Alison Ehrlich, MD, MHS*

### **A NOTICE TO OUR PATIENTS REGARDING OUR OFFICE POLICY**

In an attempt to keep our patients informed and to ensure proper reimbursement for the services rendered, we ask that you carefully read the following instructions. By working closely together, we can provide you with a better care and avoid confusion in the future. Dr. Ehrlich does not participate in any health insurance plans. However, we will be happy to provide you with a copy of services (including relevant codes) so that you may submit to your insurance carrier(s).

**Payment Policy:** It is your responsibility to pay in full for services rendered at the time of service.

**Labs and Pathology:** We will submit these charges to your insurance

**Cancellations:** We ask for a 24hr notice for cancellations. We reserve the right to charge a \$25.00 fee for all medical visits and a \$75.00 fee for all procedural visits (including patch testing).

**Prescription Refills:** We request at least 48 business hours to refill prescriptions. If your pharmacy plan requires a prior authorization, please allow several additional days for non-biologics and two weeks for biologics.

**Telehealth/Virtual Visit:** If I request a telehealth visit (virtual visit), I consent to participate in such a visit and understand that I may terminate such visit. I understand that during the visit there technology issues may arise and the Dr. Ehrlich may request an alternate visual platform to complete the visit.

**Forms and letters:** We will send a letter of update to your referring physician. If you were not referred and would like a letter sent to your physician, please inform our staff. If you would like your previous medical records reviewed by Dr. Ehrlich, we can assist in faxing a release of records.

---

PATIENT NAME

---

SIGNATURE

---

DATE