



PLACE LABEL HERE

255 Glen Cove Road, Carle Place, NY 11514
Phone 516.877.2400 • Fax 516.877.1560

For Billing and Insurance questions please call:
516.804.5214

A WORD ABOUT SURGERY CENTER CHARGES

Our center and attending physicians participate in most insurance plans. **Therefore, provided that you have met any deductibles or coinsurance your surgery should be covered.** However, Island Eye does bill **separately** from your doctor, just like a Hospital does. Many insurance plans, including Medicare, cover 80% of the **“reasonable and customary”** charges for your procedure. If you have any secondary insurance you wish us to bill, please notify your surgeon’s office prior to your surgery.

Island Eye complies with the requirements of providers and bills the patient for the balance due after insurance payments. (This amount could be for deductibles or coinsurance not met). Please be sure to bring to Island Eye Surgicenter all of your insurance cards that are in effect on the date of your surgery. If there is any balance after your insurance companies make their payments to us, you will be sent a statement from our billing office. Your surgeon has no control over these balances. The amount that Island Eye Surgicenter bills you is your responsibility. We send this statement to you after we are informed by your insurance carriers that you are responsible to us for this balance.

Our anesthesia providers, **Nassau Ambulatory Anesthesia Associates**, are independent of the **surgery center.** We will provide them with copies of the insurance cards that you bring with you. They will bill your insurance carriers directly. Occasionally, they will not be in a plan that your surgeon and the facility (Island Eye Surgicenter) are in. **In that rare situation, you may get a bill for anesthesia services.** Their phone number is 1-888-369-8483 if you have any questions.

Finally, if tissue is removed during your surgery, a pathologist must examine it. Insurance companies change labs frequently. **Most often, your insurance company will cover the pathology bill.** However, you may be responsible for a portion of the bill. In this situation, the bill you receive is your responsibility.

If you have any questions about Island Eye charges, please call 516-804-5214.

ISLAND EYE SURGICENTER

I have received a copy of this information and will review it so I understand my financial responsibilities for this surgery.

Patient or Responsible party Signature

Date