SHERI SPIRT, M.D.

REVISED 11/05/26

16 EAST 96TH STREET
UNIT 1A
NEW YORK, N.Y. 10128

PHONE: 212 595-6901
FAX: 212 595-6901
EMAIL: SSDR18@AOL.COM



OFFICE POLICY:

1. THERE IS A FEE FOR A MISSED APPOINTMENT WITHOUT AT LEAST **48 HOUR CANCELLATION NOTIFICATION.** IN MOST CASES YOUR INSURANCE COMPANY CAN NOT BE BILLED FOR THE MISSED SESSION AND IT WILL BE YOUR RESPONSIBILITY. IT WILL BE FOR THE AMOUNT OF THE BILLED SESSION. IF YOU ARE EMAILING ME TO NOTIFY OF A NEED TO CANCEL, PLEASE MAKE SURE YOU HAVE RECEIVED A CONFIRMATION EMAIL FROM ME STATING I AM AWARE OR YOUR NEED TO CANCEL. I KNOW THAT THERE CAN BE PROBLEMS IN CYBERSPACE WITH LOST EMAILS, AND I RESPOND TO ALL.

2. DUE TO THE RISING ADMINISTRATIVE COSTS, AND AS I DO PROVIDE ADEQUATE AMOUNTS OF MEDICATION BETWEEN APPOINTMENTS, IT WILL BE NECESSARY TO ASSESS A FEE OF $20 FOR TELEPHONE REFILLS, ON A CASE BY CASE BASIS. PLEASE NOTE, IN NO CASE HOWEVER IS A TELEPHONE REFILL MEANT AS A SUBSTITUTE FOR AN OFFICE VISIT. PLEASE MAKE SURE THAT OFFICE APPOINTMENTS ARE SCHEDULED IN CONJUNCTION WITH ANY TELEPHONE REFILLS. PLEASE ALSO NOTE THAT IF IT IS MORE THAN 3 MONTHS THAT YOU HAVE BEEN SEEN, A PRESCRIPTION CANNOT BE CALLED IN (AGAIN ON A CASE BY CASE BASIS) BUT AN OFFICE APPOINTMENT MUSE BE SCHEDULED. THE SAME IS TRUE FOR A PATIENT WHO HAS BEEN NOTIFIED THEIR CHART IS NO LONGER ACTIVE.

3. AGAIN, BECAUSE OF THE RISE IN ADMINISTRATIVE COSTS, IT HAS BECOME NECESSARY TO ASSESS A FEE OF $20 FOR ANY PRESCRIPTIONS THAT REQUIRE FURTHER AUTHORIZATION FROM YOUR INSURANCE COMPANY. THIS WILL HOWEVER BE A ONE TIME FEE, ANNUALLY , PER MEDICATION AUTHORIZED.

4. IN ADDITION, IT IS YOUR RESPONSIBILITY TO MAKE SURE YOU HAVE PROPER AUTHORIZATION FOR YOUR VISITS FROM YOUR INSURANCE COMPANY. MY OFFICE WILL PREPARE ANY NECESSARY DOCUMENTATION TO OBTAIN THIS AUTHORIZATION, BUT IT IS UP TO YOU TO MAKE SURE YOU HAVE VALID UP TO DATE AUTHORIZATION ON FILE. YOU WILL ALSO BE RESPONSIBLE FOR ANY BALANCE DENIED BY YOUR INSURANCE COMPANY.

5. AS OF 7/1/09 THERE IS AN ADDITIONAL FEE OF $30. FOR ALL BOUNCED CHECKS TO COVER OUR ADMINISTRATATIVE COSTS.

6. DUE TO THE TIME INVOLVED OUTSIDE OF OFFICE VISITS THERE IS A FLAT FEE OF $100 FOR COMPLETION OF FORMS REQUIRED FOR DISABILITY, SCHOOL ACCOMODATIONS, AND LEGAL PAPERS.

I HAVE HAD A CHANCE TO REVIEW THE ABOVE OFFICE POLICIES AND UNDERSTAND THEM.

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(SIGNATURE)

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(DATE)