



**Henry Dorn, MD
& Associates**
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High Point, NC 27262
Phone 336.889.2000
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**Effective Immediately
Per Medicaid Guidelines**

If you exceed the allowed guidelines for services provided by our office, we will bill you directly for those services.

We follow strict guidelines with Medicaid to ensure we receive the proper reimbursement allowed for services rendered, if you have been seen by multiple providers or had certain services prior to coming to our office; it is your responsibility to notify us.

- If you have exceeded your allowed yearly visits (10 for all providers combined), you will be responsible for paying out of pocket for the visits over the allowed number.
- If you have services that are not covered under your Medicaid program (IE Family Planning, Pregnancy), you will be responsible for paying out of pocket prior to services rendered.
- **If you have active primary insurance coverage, you must notify this office and Medicaid. Not to inform Medicaid of active primary coverage is illegal and may result in you being fully financially responsible for all charges.**
- If you neglect to obtain retro-active coverage for date(s) of service already provided.

I have read and understand the above Medicaid Guidelines and agree to pay for services not covered by Medicaid.

Patient Name _____
(Print name) (Signature)

Date: _____

Office Witness: _____