



### OUT OF NETWORK COVERED SERVICES

In compliance with the newly passed Indiana House Bill 1273 “Out-of-Network Covered Health Services”, referring offices are required to provide any patient receiving a referral with the following information.

- That an out- of -network provider may be called upon to render health care items or services to the covered individual during the course of treatment.
- That an out-of-network provider described in #(1) above is not bound by the payment provisions that apply to health care items or services rendered by a network provider under the covered individual’s health plan.
- That the covered individual may contact the covered individual’s health plan before receiving health care items or services rendered by an out-of-network provider described in #(1) above.
  - to obtain a list of network providers that may render the health care items or services; and
  - for additional assistance.

It is the sole responsibility of the patient, parent or guardian to contact their individual insurance provider for a list of covered providers for any and all referrals from our office.

I understand that Fort Wayne Pediatrics physicians and/or staff will not be responsible for any fees for services incurred with a referral appointment to another office.

_____	_____	_____
Patient’s Name	DOB	Date
_____	_____	
Parent/Guardian Name	Parent/Guardian Signature	

Referral to \_\_\_\_\_