

Toufexis Family Eye Care

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Insurance Questions

Each subscriber in a health plan receives a policy handbook upon signing up of his or her insurance. If you receive health care benefits through your employer, they can provide you with a copy. Covered benefits vary from policy to policy and from insurance carrier to insurance carrier. It is important that you read through your most recent handbook and know your policy, making notes of any questions you may have.

If your insurance is provided through your employer the human resources staff can assist you. If you purchased your insurance, the agent who sold you your policy should be able to answer your questions. Or you may contact your insurance carrier directly at any time. Typically the contact information is listed on the reverse side of your insurance card.

Your insurance carrier must notify you in advance of any changes in your policy. It is your responsibility to keep current of those changes.

Medical providers are not responsible for knowing your policy and what is covered or not covered. Patient benefits vary widely with hundreds of different plans available in today's market. Physicians' offices bill your insurance as both a courtesy and convenience to you as a patient. However, your benefits are your responsibility to know and understand.

You doctor can legally request your social security number, and requires it to administer aspects of your health plan, such as obtaining prior authorizations for medical services. Every doctor's office is required by law to maintain a high level of security over patients' personal information. The information is never sold or provided to unauthorized individuals.

Many health plans require permission in advance of a patient receiving particular medical services in order for the service to be paid. Your medical provider usually will call to obtain authorization for a service, but it is your responsibility to know if your insurance requires prior authorization.

You can review covered benefits in your policy handbook or contact your customer service representative. They are responsible for helping you understand your policy. Additionally, review the explanation of benefits that your insurance carrier sends you after you have received medical services. This will explain your charges and how it was reviewed and paid according to your policy by the insurance carrier. Any dollar amounts you owe will match the statement you receive from the medical provider, as the medical provider obtains their information from the insurance carrier.

Payment for services received is expected at the time of service. In most instances, you should be prepared to pay for your office visit the day you visit your physician. If you have any questions about your physician's payment policy you should ask the office staff prior to receiving treatment.