

STETHO MD[®]

PRIMARY CARE & WALK-IN

NOTICE TO PATIENTS:

STETHO MD charges an **additional fee** for services provided “AFTER HOURS” (evenings, weekends and holidays).

For patients **with insurance** coverage this additional charge will be submitted to your insurance carrier as a courtesy under CPT code 99050, 99051. Out-of-pocket costs for all services provided will depend on your individual contract with your carrier.

For patients without insurance coverage the self-pay additional fee is \$25.

The documentation fee for forms is \$35 for the first page and \$5 for every additional page.

Our Lab convenience fee is \$15 dollars.

Medical records copies price for the first 25 pages, the cost shall be \$1.00 per page. For each page in excess of 25 pages, the cost shall be 25 cents plus postage and sales tax.

If you have any questions regarding this fee, please inform the front desk. Thank you.