

LENOX HILL RADIOLOGY & MEDICAL IMAGING ASSOCIATES, P.C.

PATIENT INTAKE POLICIES AND PROCEDURES

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POLICY

Lenox Hill Radiology & Medical Imaging Associates, P.C. (the "Professional Corporation") specializes in the provision of radiology and diagnostic imaging services. The Professional Corporation serves a broad and diverse patient population that is referred to the Professional Corporation for diagnostic imaging services by many dozens of physicians and other health care providers or a patient makes an independent selection of the Professional Corporation based upon prior experience at our offices or our participation with the patient's managed care plan. Patients not only reside in New York City, but also come from the Greater New York area, other states and even other countries. This is part of the extraordinary draw of the state-of-the-art health care facilities and heralded practitioners that are featured in New York City. The Professional Corporation is proud that it is also considered by many to provide the highest level of care on behalf of its patients.

The diagnostic imaging services received by the Professional Corporation's thousands of patients are paid for in a variety of ways. Many patients participate in health insurance, health maintenance organizations ("HMO") or other managed care plans (each, a "Private Plan" and collectively, "Private Plans") or Medicare, Medicaid or other government supported plans (collectively "Government Plans") that reimburse for medically necessary radiology and diagnostic imaging services. Historically, the costs of a majority of the services received by patients of the Professional Corporation are covered in whole or in part by Private and Government Plans. However, some patients are referred to the Professional Corporation who either have no insurance or who are personally reimbursed, in whole or in part, by their employer, union or a Private Plan. In such cases, the Professional Corporation generally has no direct dealings or interaction with the third-party payor.

Patient Services

Provided that a prospective patient meets the criteria established by the Professional Corporation, such patient should be furnished radiological services by the Professional Corporation to the extent that the patient's needs and requirements can reasonably be met by the Professional Corporation. In other words, a patient should be afforded services by the Professional Corporation if our intake staff determines upon speaking with a prospective patient, who has been referred to the Professional Corporation, and reviewing other information furnished on behalf of the patient that: (1) the Professional Corporation is equipped to

furnish the requested radiological service, (2) our Professional Corporation is geographically convenient for the prospective patient; and (3) our Professional Corporation participates with the prospective patient's Private or Government Plan, *or* will accept payment directly from the patient and the patient is willing and able to pay the Professional Corporation's rates for the requested services *or* another mutually acceptable payment arrangement is worked out between the Professional Corporation and the prospective patient. Clearly, other customary and reasonable preconditions established by the Professional Corporation should be reviewed before we furnish services on behalf of a prospective patient, including, for example, (1) obtaining a required pre-authorization, (2) a technologist reviewing a prospective patient's medical history to assure that the radiological test might not be dangerous or otherwise detrimental to the patient's health; and (3) availability of a convenient and timely appointment.

Lenox Hill Radiology Management, LLC ("Management"), the company for which many of our administrative and managerial staff works, provides intake and scheduling and related services on behalf of New York Private Medical Imaging Practice, P.L.L.C. ("New York Private") and other radiology practices, as well as for the Professional Corporation. Certain of Management's personnel actually provide similar services on behalf of the Professional Corporation, New York Private and other radiology practices. All staff is expected to conduct these services in accordance with all policies and procedures adopted from time to time by the Professional Corporation as well as the policies and procedures issued by Private Plans and Government Plans with which the Professional Corporation participates.

Patient Referrals and Improper "Shifting" of Patients

It is important that you and all other staff, whether working with the Professional Corporation or New York Private or both, not purposefully or inadvertently move a patient referred to or selecting one practice to another practice. To phrase it another way, if a patient were referred to the Professional Corporation for diagnostic imaging services, then the patient, to the extent it is appropriate for the patient to receive professional services at the Professional Corporation's offices, should receive his/her services from the Professional Corporation and not from New York Private or another radiology practice. The referring physician, patient, and/or the patient's Private Plan chose to have the patient's imaging study performed by the Professional Corporation for a host of reasons. It would be inappropriate, and potentially fraudulent, for a patient referred to the Professional Corporation to be seen instead by New York Private or another professional practice. Of great concern to third-party payors and typically patients as well, those patients who participate in managed care plans generally ought to be seen by providers to which they were referred or they self-selected, and they should not be steered, intentionally or inadvertently, to a non-participating provider, where the patient may be required to pay a considerably higher co-payment or deductible, and the third-party payor is asked to pay a co-insurance amount that may exceed the rate paid to participating providers. Taking an in-network patient and transforming that patient to an out-of-network patient status may both violate the terms of managed care plans and contracts with which the Professional Corporation participates and may be viewed by governmental enforcement officials as fraudulent, as it potentially raises the cost of services to both the patient and his/her insurer.

Accordingly, great care must be taken to assure that patients are not shifted, and disciplinary action will be taken against personnel who do not carefully abide by this policy.