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## **FEE SCHEDULE**

<b><u>MEDICATION PRIOR AUTHORIZATION</u></b>	<b><u>\$25</u></b>
<b><u>FMLA PAPERWORK</u></b>	<b><u>\$25</u></b>
<b><u>FORMS NEEDING PROVIDER SIGNATURE</u></b>	<b><u>\$25</u></b>
<b><u>LETTER OF MEDICAL NECESSITY</u></b>	<b><u>\$25</u></b>
<b><u>CERTIFICATE OF MEDICAL NECESSITY</u></b>	<b><u>\$25</u></b>
<b><u>ADDITIONAL DOCUMENTATION</u></b>	<b><u>\$25</u></b>

Your physician may write a prescription that requires a “prior-authorization” (PA) from your insurance company. The PA is a form your insurance company may require prior to them agreeing to pay for your medicine.

The PA is your insurance company’s document so you will have to call and have your insurance company fax us their form in order for us to process your request. Our fax number is (256) 492-4017. It is common for them to state they have faxed the form over but they often do not check to see if the paperwork was received. It may not go through if our fax machine is busy at the time.

We require a \$25 payment to process your request. The fee covers the time necessary to get their form processed. We often have to fax it multiple times before they acknowledge receipt. They also require our staff to call and remain on hold for lengthy periods in order to process the request. The entire PA process can take several days.

Paying the \$25 does not guarantee they will pay for the medicine. All it means is that we will process the request. **The decision to pay for your medicine is between you and your insurance carrier.**

**Please know- We want you to have this medicine and would not have prescribed it unless we thought it beneficial for your care.** Your insurance carrier may not have the same interests. We also realize how inconvenient this process is and wish your insurance company would simplify or eliminate their need for PA forms.