Ernest L. Sink, MD
Pediatric and Young Adult Hip Surgery
Center for Hip Preservation
Hospital for Special Surgery
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212-606-1268, f: 212-606-1685

PAYMENT POLICY AGREEMENT

Dear Patients.

Thank you for choosing Dr. Sink as your orthopedic specialist. In order to provide the best care, we will like to establish a clear payment policy. If at any time you have questions, please inform our office immediately.

Dr. Sink participates with the following insurance plans:

- > ALL Oxford Health Plans
- > United Healthcare
- Medicare

Please note that if you do not have one of the above plans, you will be responsible for your visit in full at the time of service unless other definite financial arrangements have been made prior to treatment. Upon payment, we will gladly furnish you a receipt for you to submit to your insurance company for reimbursement consideration. Please contact your insurance company to verify your out-of-network benefits and coverage detail.

In the case that Dr. Sink does participate with your plan, you will be responsible for your designated copay at the time of service.

If you require additional treatment or a surgical procedure, as a courtesy, our office will obtain authorization for your procedure and submit the claim on your behalf. Please be informed that authorization for your procedure is not a guarantee of payment.

By signing this agreement you understand and agree to the payment policy of the office of Dr. Ernest Sink.

| Signature of Patient/ Guarantor | Date |
|---------------------------------|------|