Empire BlueCross BlueShield

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HMO Patient Coverage Waiver

The undersigned ("you") is covered by a benefit product issued or administered by Empire BlueCross BlueShield HMO, or Empire HealthChoice HMO, Inc., collectively ("Empire") that requires that you select a Primary Care Physician (PCP). You are seeking treatment from:

_____ today for You or your eligible dependent.
Doctor's Name

You are advised that the terms of your Empire benefit contract require you to obtain services from your participating Empire primary care physician, in order to be eligible for full benefit contract coverage related to this office visit.

Please be further advised that the Provider indicated above has verified the PCP on file with Empire. If you proceed today to receive the services you seek, *the services rendered will not be "covered services" under the terms of your benefit contract and you will be responsible for payment of amounts up to the provider's FULL CHARGE for all services provided to you or your dependent.* Please note that the PCP on file cannot be backdated.

You have the right to contact Empire to change your PCP before receiving the services you seek in order to enjoy full benefits under the terms of your Empire benefit contract. If you have any questions regarding your PCP under your benefit contract or are not sure whether a referral is required before receiving the services you seek today, please contact Empire Customer Service at the telephone number listed on the back of your Empire identification card.

By signing below, you are acknowledging your consent to pay directly to the above provider all charges arising from your or your dependent's office visit today.

Accepted and agreed: _____

Signature, Patient or Legal Guardian Date

Print name of patient and/or legal guardian (if applicable): _____

Patient/Legal Guardian

Contract Holder's Name: _____

Contract Holder's ID No.: _____

Empire Provider's ID No.: _____

Services provided by Empire HealthChoice HMO, Inc. and/or Empire HealthChoice Assurance, Inc., licensees of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.