

The Foot and Ankle Wellness Center of Western Pennsylvania

Thank you for choosing The Foot and Ankle Wellness Center for your foot and ankle needs. Your appointment is on _____ at _____. We have enclosed forms that we would like you to complete before your office visit. **Please bring the completed forms, your insurance card(s), and any other important information related to your health that we may need on the day of your appointment.** If you are enrolled in a manage care plan such as Gateway, Unison, Medplus, Aetna US health care, etc., it is your responsibility to obtain a referral and bring it the day of your appointment. If your family doctor wishes to fax the referral our fax number is 555-555-5555. If your referral is not at our office at the time of your appointment you will be asked to be rescheduled. Any co-payments are due on the day of your appointment.

Our fee for a new patient is \$75.00, unless you have managed care co-pay. This is payable the day of your visit. If you have no insurance, a payment plan can be arranged, but a down payment is due the day of service.

Billing Policy

We participate in Medicare, Medical Assistance, Highmark Blue Shield, as well as other private insurances. Our office will submit a claim to your insurance company and try to collect the amount due for your services rendered. You will remain responsible for any deduction and co-insurances. If your private insurance company does not pay within ninety (90) days of submission, the full amount of the bill will become your responsibility.

We will send a final notice at ninety (90) days. If the bill is not paid in 120 days, it may be turned over to our collection agency, and at that time you will be contacted by the agency to pay any unpaid balances.

If you become disable and we need to fill out additional forms for disability, for loans, or sick pay, there is a \$10.00 charge and it is payable the day the form is complete. If you have a work related injury or accident we need the date of injury, claim number and if you reported the injury.

Ford City Location
313 Ford Street
Ford City, PA 16226
P: (724) 763-4080
F: (724) 763-4083

Butler Location
100 Evans Road
Butler, PA 16001
P: (724) 841-0188
F: (724) 841-0189
Toll Free: (844)-FOOTDOC (366-8375)

Monaca Location
3578 Brodhead Road
Monaca, PA 15061
P: (724) 775-6168
F: (724) 775-2633

Grove City Location
675 N. Broad Street Ext, Suite 2
Grove City, PA 16127
P: (724) 450-1144
F: (724) 450-1140



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