INSURANCE QUESTIONNAIRE

This form MUST be COMPLETED in order to keep your appointment!

Insurance authorization can be the most challenging and time consuming part of your visit when coming to Cincinnati Children's. Although, we will do our best to assist you when questions arise, it is important to note that the insurance responsibility lies solely on the family. Below is a list of questions that you need to ask your insurance carrier as soon as you begin to plan your visit to Cincinnati Children's. ***If this form is not complete, your appointment may need to be rescheduled until authorization can be given and the below information is received.***

Getting Started:

1. Call the customer service number on your insurance card. Make sure you provide all Tax ID or NPI numbers provided below, so that each provider can be properly identified!

2. Is Cincinnati Children's Medical Center (Tax ID: 31-0833936) in my network? _____

3. Do I need a referral from my family doctor to see a specialist? _____
   If yes, it is **YOUR** responsibility to contact your family doctor to request a referral for **EVERY** provider you are requesting to see.

4. Is pre-certification or prior authorization required to see a specialist? _____

5. The main campus is located at: 3333 Burnet Avenue, Cincinnati, OH 45229

6. Are the following providers in my network?

Anne Lucky, MD	Dermatology	NPI# 1285688150:	_____
Michael Farrell, MD	Gastroenterology	NPI# 1386719847:	_____
Richard Azizkhan, MD	Pediatric Surgery	NPI# 1790736056:	_____
Kenneth Goldschneider, MD	Pain Management	NPI# 1578521944:	_____
Alexandra Szabova, MD	Pain Management	NPI# 1184672362:	_____
Roger Cornwall, MD	Orthopaedic-hand	NPI# 1376633826:	_____
Eric Wall, MD	Orthopaedic-feet	NPI# 1659305050:	_____
Anthony Kamp, DMD	Dental	NPI# 1396846259:	_____
Robert Beekman, MD	Cardiology	NPI# 1447201892:	_____
Ravindhra Elluru, MD	ENT/Otolaryngology	NPI# 1356361968:	_____
Constance West, MD	Ophthalmology	NPI# 1356374565:	_____
Anne Lynch-Jordan, PhD	Psychology	NPI# 1942259437:	_____

7. What are my in and out of network benefits to see a specialist? _____
   _____
   _____

8. Co-Pay (due at appointment, for EACH provider)? _____

9. Deductible? _____

10. Out of pocket max. _____

INSURANCE QUESTIONNAIRE

What now?

It is important to gather the requested information as soon as possible and return the completed questionnaire along with the rest of the packet back to Cincinnati Children's EB Center.

Our Financial Service Representative will use this form, to aid in obtaining pre-certification or prior authorizations that are required by your insurance carrier, to pay for your child's visit. Should you run into difficulty, or have any questions, please feel free to contact our Financial Service Representative.

Financial Services Representative
3333 Burnet Avenue, MLC 3004
Cincinnati, Ohio 45229-3030

513-636-2009 EB office #
800-344-2462 ext. 62009 toll free
513-636-5867 fax #