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**RE: Reimbursement for office visits related to erectile dysfunction.**

Dear Patient,

There is a growing trend among insurance companies to refuse payment for any office visit that relates to the evaluation and/or treatment of erectile dysfunction. This would include any visit to the office that results in prescribing the drugs Viagra, Levitra, Cialis, caverject, or similar medications. Many insurance companies refuse to pay for an entire office visit even if your main reason for seeking treatment is not related to erectile dysfunction.

Even if the reason for your visit is the treatment of erectile dysfunction and you have been provided a referral by your managed care physician, your insurance company may still refuse to pay for your entire visit.

We are distressed by this practice, and we will continue to make every effort to evaluate and treat your conditions in an effective and appropriate manner. Due to the large number of insurance companies we deal with, we will be unable to determine at the time of your appointment whether or not your insurance will cover these services. We strongly recommend that you become familiar with your own individual policy, so that you are aware of any such limits on your coverage.

Due to this growing trend by insurance companies to refuse payment for the evaluation and treatment of erectile dysfunction, it has become necessary for this office to institute a new policy concerning payment for these services. Effective immediately, if evaluation, management, and/or treatment of erectile dysfunction is provided for you during an office visit, you must agree to be responsible for payment in full for the services provided.

As a courtesy to you we will not require you to pay this sum at the time of your visit, and we will submit your bill to your insurance company for you. However, if we are denied payment for any or all of the services provided during your denied appointment, you will be responsible for payment of the amount in full within 30 calendar days upon notification.

In addition to co-payments, if applicable, the charges for these visits are as follows:

- Viagra, Levitra and Cialis refills (office visit for refills only) - \$25.00
- Penile injection therapy – refills only - \$25.00
- Office visits for established patients involving injection of medications to diagnose and/or treat erectile dysfunction - \$100.00

If you are a new patient to this practice who presents without insurance, insurance card or if applicable, a referral, you will be required to pay our usual and customary fee of \$250.00 for a new patient consultation at the time of the visit.

If any checks are returned for insufficient funds, there will be an additional penalty fee of \$25.00, which must be paid within 30 calendar days upon notification. Should financial need arise, we can work out a payment plan, but the entire amount must be paid in full within 90 days and will be subject to all cost and fees outlined in the Patient Agreement form signed contemporaneously with or prior to this Reimbursement Agreement.

We regret that we have to resort to these steps and truly feel that the insurance companies have overstepped their bounds with regard to reimbursement issues. If you have any questions or concerns about this issue, please do not hesitate to discuss them with us.

Your signature on this document will serve as your acknowledgement and agreement of your responsibility for payment of services rendered, and your understanding of the contents of this document.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

## Commonwealth Urology

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### VIAGRA / LEVITRA / CIALIS (Oral pills for treatment of erectile dysfunction)

Dear Patient:

These pills are now available for treatment of erectile dysfunction. They may or may not benefit your individual situation. You are instructed to take one 50 mg Viagra, 10 mg Levitra pill or 10 mg Cialis approximately one hour prior to desired intercourse. If the pill is not completely effective and if no significant side effects are recognized you may try taking two 50 mg (100 mg Viagra) Viagra pills, two 10 mg 20 mg Levitra) Levitra pills or two 10 mg (20 mg Cialis) Cialis after a 24-hour period has elapsed.

The main side effects of these pills, in order of incidence, are as follows:

- 1) Rash – 2%
- 2) Headache – 16%
- 3) Flushing (a hot feeling or red face) – 10%
- 4) Dyspepsia (upset stomach) – 7%
- 5) Nasal congestion (stuffy nose) – 4%
- 6) Abnormal vision (you may see blue-tinge to your vision, particularly around the edges of light) – 3%
- 7) Diarrhea – 3%
- 8) Dizziness – 2%
- 9) Hearing Loss - < 1%
- 10) Sudden, temporary memory loss

These side effects will generally resolve on their own within 24 hours. If any serious side effects occur, you are not to take any additional pills. Do not take Viagra, Levitra or Cialis within 24 hours of penile injection therapy or intraurethral suppository use. There have been reported cases of priapism (prolonged erection). If your erection lasts longer than four hours, call this office or go to the nearest emergency room.

This medication is contraindicated (**DO NOT TAKE**) if you are taking a nitrate medication (i.e.: Nitroglycerin, Isordil, Isosorbide), see attached list of commonly prescribed nitrates. You should not take Viagra, Levitra or Cialis if you have angina or chest pains. Should you develop chest pains, angina, or require the need for Nitroglycerin usage, (**DO NOT TAKE ANY VIAGRA, LEVITRA OR CIALIS**) without the permission of your urologist or cardiologist. The other relative contraindications are a possible increase in plasma, or blood level, of the Viagra or Levitra if you are taking Cimetidine (Tagamet), Erythromycin or anti-fungal medication (pills, not creams). This list is incomplete. Before taking Viagra, Levitra or Cialis ask your pharmacist regarding other possible drug interactions including alpha blocker usage (Hytrin/Terazosin, Cardura/Doxazosin, Flomax/Tamsulosin).

If Viagra, Levitra or Cialis is successful, call your pharmacy or any pharmacy in the area that your insurance contracts with until you are able to find one that has the medication in stock. Refills will be provided with the prescription, but after a one year period you will be required to make an appointment before any additional refills will be provided.

I have no way of knowing whether or not this prescription will be covered by your insurance plan. Therefore, I totally divulge myself of any responsibility regarding Insurance Coverage for this medication. This is your responsibility. If you have any questions, call your insurance company prior to calling us with the request for a prescription or an appointment for a prescription.

**The Following is a List of some Commonly Prescribed Nitrates by Class**

(Note: This list is illustrative. It is not meant to be all-inclusive.)

Tetranitrate

Sodium Nitroprusside

Nitroglycerin:

Deponit® (transdermal)

Minitran™

Nitrek

Nitro-Bid®

Nitrodisc

Nitro-Dur®

Nitrogard™

Nitroglyn

Nitrolingual Spray®

Nitrol® Ointment (Appli-Kit)®

Nitrong

Nitro-Par

Nitrostat®

Nitro-Time

Transderm-Nitro®

Schwartz Pharma, Inc.

3M Pharmaceuticals, Inc.

Bertek Pharmaceuticals, Inc.

Hoechst Marion Roussel

G.D. Searle Company

Key Pharmaceuticals, Inc.

Forest Pharmaceuticals, Inc.

Kenwood Laboratories

RhonePoulencRorerPharmaceuticals

Savage Laboratories

RhonePoulencRorer Pharmaceuticals

Parmed Pharmaceuticals

Parke-Davis

Time-Cap Laboratories

Novartis Pharmaceuticals Corp.

Isosorbide Mononitrate:

Indur®

Ismo®

Monoket® Tablets

Key Pharmaceuticals, Inc.

Wyeth-Ayerst Laboratories

Schwarz Pharma, Inc.

Isosorbide Dinitrate:

Dilatrate®-SR

Isordil®

Sorbitrate®

Schwarz Pharma, Inc.

Wyeth-Ayerst Laboratories

Zeneca Pharmaceuticals

Erytharyl Tetranitrate

Pentaerythritol Tetranitrate

Sodium Nitroprusside

Substances such as amyl nitrite (poppers), which are sometimes abused, should never be combined with Viagra, Levitra or Cialis. Viagra, Levitra or Cialis are not contraindicated with nitrates found in foods.

I have read this form and I hereby give informed consent for the administration of the samples and/or the prescription for Viagra, Levitra or Cialis pills. Dr. Basile/Dr. Patel has given me a chance to ask any questions, and I express a complete understanding of the above.

Print Name (Patient): \_\_\_\_\_ Date: \_\_\_\_\_

Patient Signature: \_\_\_\_\_