



**NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE**

Mary T. Bassett, MD, MPH

Commissioner

Dear Patient:

This letter is to notify you that the New York City Health Department is required by law to bill health insurance companies for tuberculosis (TB) services. If you have health insurance, the Health Department will bill your health insurance plan but will not collect any payments or copayments from you.

If you do not have insurance, you will still get services. Everyone will receive services.

If you have health insurance but do not have your card today, please take this form with you and fill in the information below (available on your insurance card). Please mail the completed form to:

NYC Department of Health and Mental Hygiene
Attn: Division of Finance
42-09 28th Street, CN 32W
Long Island City, NY 11101

Please bill the health insurance listed below for my visit:

Health Insurance Name: _____

Health Insurance Address: _____

Health Insurance Telephone Number: _____

Insurance ID: _____

Group Number: _____

If insurance coverage is through a spouse, parent or other:

Policy Holder's Name: _____

Policy Holder's Date of Birth: _____

Relationship to Insured: () Spouse () Parent () Other

Signature: _____

Date: _____

Please do not submit any payments or copayments. For more billing information, visit nyc.gov/health and search for "clinic billing FAQ," or call 311 and ask about "health department clinic billing." If you have any questions, please ask clinic staff.

Sincerely,

Mary T. Bassett, MD, MPH
Commissioner