

505 Irving Ave, Ste 3733
 Syracuse, NY 13210
 O: (866) 240-4485 F: (315) 666-1379
 CLIA #33D2218809

PATIENT INFORMATION		
Legal Last Name		Legal First Name
Date of Birth (MM/DD/YYYY)		Biological Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Gender (if differs from biological sex at birth) <input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Non-binary <input type="checkbox"/> Self-described
Guarantor First Name		Guarantor Last Name
Email Address		Mobile Phone Number
Street Address		
City	State	Zip/Postal Code

INSURANCE INFORMATION		
Indicate the type of insurance <input type="checkbox"/> Private <input type="checkbox"/> Medicare <input type="checkbox"/> Medicaid		
Policy Holder Name	Date of Birth (MM/DD/YYYY)	Relationship to Patient
Primary Insurance Company Name (required)		Insurance Company Phone Number
Policy ID Number	Group ID Number	
Secondary Insurance Company Name (if applicable)		Insurance Company Phone Number
Policy Holder Name (if differs from above)	Date of Birth (MM/DD/YYYY)	Relationship to Patient
Policy ID Number	Group ID Number	
*Please attach a copy of any insurance cards referenced in this section (both sides of card required).		

ORDERING PROVIDER INFORMATION

Ordering Provider Name	
Provider NPI Number	Provider Email Address
Provider Phone Number	Provider Fax Number
Tests Requested <input type="checkbox"/> 1001 Autism/XL-Intellectual Disability Panel (NGS) <input type="checkbox"/> 1002 Fragile X Testing (FMR1 Repeat Analyses) <input type="checkbox"/> 1003 Chromosomal Microarray Testing <input type="checkbox"/> 1004 Single Gene Order <i>(list genes below)</i>	ICD-10 Codes Test Options <input type="checkbox"/> Sequencing only <input type="checkbox"/> Deletion/Duplication only <input type="checkbox"/> Sequencing & Deletion/Duplication

Please send this form via:

Fax: (315) 666-1379 **or**

Email: billing@quadrantlaboratories.com

Results of the insurance benefit investigations will be delivered via the guarantor's phone number listed above. Please ensure to list a good contact phone # and/or email for us to reach out once the results are complete.