

Caring Partner Medical Clinic

OFFICE AND FINANCIAL POLICIES

As you are well aware, the business of providing insurance-based healthcare is increasingly complex and challenging. For our office to operate effectively and provide the best service to you and your family, we need your cooperation with the following policies. Your clear understanding of these policies is very important. Please let us know if you have any questions or concerns.

OFFICE HOURS

Our office is currently open Monday-Friday from **8:00 am to 5:00 pm**. In future, this may change and you will be notified. Patients are not scheduled from 12:00 pm through 1:00 pm for lunch. However, our phones remain open for messages and appointments scheduling. We are closed in observance of major holidays.

NEW PATIENTS

First time patients are asked to arrive **30 mins EARLY** to allow adequate time for completing the initial paperwork. For purposes of maintaining continuity of care, we ask that you bring us the **latest relevant records** with the **most recent test results** and **current medications list**. We do ask that you remain the **sole custodian** of your entire medical records from your previous healthcare providers. Should there be a need to further examine your previous records, our providers will have you bring your records back for additional review during subsequent office visits.

COURTESY

We strive to provide the best medical care for our patients. While we make every effort to provide prompt on-time service, the healthcare needs of each individual do not necessarily lend themselves to an exact schedule. We therefore appreciate your understanding and patience. If you have a suggestion or complaint for our office, please let us know. Angry or foul language directed to our staff regardless of the issues involved will absolutely not be tolerated and will be grounds for immediate dismissal from our practice.

SUPERVISION OF CHILDREN & MINORS PRESENT WITHOUT PARENTS OR LEGAL GUARDIAN

For safety reasons, we depend on parents to properly supervise their child(ren) at all times. Our staff cannot watch your children. Under no circumstances should a child under the age of 10 be left unattended. We also require a consent form signed by a parent or legal guardian to legally provide medical care to minors 16 and 17 years of age when the parent or legal guardian cannot be present. Minors 15 years of age or younger must be accompanied by a parent or legal guardian.

CHANGES IN ADDRESS, BILLING, OR CONTACT INFORMATION

Please notify our office in writing of any changes of address, telephone, billing or contact information. It is imperative that we have the most current information on file.

INSURANCE POLICIES & FORMS

Our office will submit claims for insurance carriers with which we participate. At **Caring Partner Medical Clinic**, we are dedicated to offer **QUALITY** and often times **beyond** the standard medical care to our patients. To this end, it is **YOUR RESPONSIBILITY** to know your particular **insurance plan benefits**.

Comprehensive physicals, immunizations, certain laboratory tests, procedures, and prescribed medications may not be covered. Prior Authorizations may be completed at the discretion of our providers. We therefore cannot guarantee that all services and therapies we provide or recommend are covered by your insurance. We also cannot just change CODES in order to modify insurance coverage as it is illegal and fraudulent. We strongly encourage you to **contact your insurance carrier ahead of time and verify appropriate coverage.**

We also require proof of current insurance at check-in for every visit. It is essential that you provide all the necessary information about your insurance, both primary and secondary. Since changes in insurance coverage are frequent, it is our policy to obtain a copy of your card(s) for applicable insurance. **Please be prepared to present your card(s) at each visit.** In case of a new policy, a copy of the enrollment form specifying insurance company name and phone number, employer and his/her phone number, insured employee name, date of birth and social security number will be required.

FEES & PAYMENTS

Payment in full is due at the time services are rendered unless we are submitting charges to your insurance company. **Copays and deductibles are due at time of service or your appointment may be rescheduled.** We accept **VISA and MASTER** cards. Other forms of payment are **money orders, cashier checks & cash**. We **DO NOT** accept personal checks. Those patients without proof of coverage may be required to pay in full or be asked to reschedule their appointments. If we are not contracted with your particular insurance plan, **YOU** must pay in full at time of service. A copy of your driver's license will be taken. You will be given a copy of our charge slip to submit to your insurance company for reimbursement purposes.

Even though we will bill your insurance, **WE ARE NOT** responsible to negotiate a settlement for a disputed claim. Billing your insurance **does not** necessarily ensure payment by the insurance company nor does it release the responsible party from its financial obligation to our office for any unpaid balance. In case of an insurance partial payment, the balance is due by **YOU** and we will send you a billing statement. Balances over **90 DAYS** due may be sent to a collection agency unless other arrangements have been made. A **\$50** fee may be assessed on accounts placed in collections.

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We may also elect to discharge you from our practice should you fail to comply with our policy. Should you require a payment plan, our office manager will be glad to discuss your options with you.

APPOINTMENTS & NO SHOW POLICY

We make every effort to provide prompt medical care to all of our patients. If you are unable to keep a scheduled appointment, please let us know **in advance**. A **NO SHOW** is when a patient fails to keep a scheduled appointment, **two** no shows may require that you seek your medical care elsewhere. In the event that you have a special circumstance regarding your missed appointment, please contact our office manager. We understand that there may be issues beyond your control and want to be understanding of special circumstances.

If you are delayed and cannot make an appointment on time, please call to advise us of your situation and provide an estimated time of arrival. Any significant delay may require the visit to be rescheduled.

If you are a walk-in patient, please understand that there are patients who have scheduled appointments, and you will be seen at the next available time slot. We strongly encourage you to call the office for an appointment first.

In general, we do not recommend combining your **PHYSICAL** visits with **PROBLEM** visits at the same time since your insurance often may not pay for both.

Due to the current nature of insurance-based medical practices, we also ask that you limit your visit to **1 TO 2 PROBLEMS only**. Should you have more medical issues that need to be addressed, please inform our staff when calling for appointments, and we will schedule more time for you accordingly. Your providers may also have you return for follow-up visits in order to address your additional medical concerns.

Multiple family member appointments **must be** scheduled in advance. Family members who are present at the time of another member's appointment, but are not scheduled, will be required to schedule an appointment at a later time. Up to **2 members** of the family may be scheduled at any one time.

PRESCRIPTION REFILLS

Please have your pharmacy fax your refill request to (469) 714 - 0088. In most cases, expired prescriptions can also be refilled in this manner, provided you are up to date on required exams and laboratory testing. We do recommend routine follow-up visits **at least every 6 MONTHS**, depending on your medical needs. Refills will therefore be provided in general for up to **6 MONTHS**, exception may include oral contraceptives and other long-term medications, which may be refilled for up to 1 year, at which time our providers may prefer to see you. Refills of prescription medications that fall under the general category of **CONTROLLED SUBSTANCES** such as **narcotics and certain mood-altering agents** may require **MONTHLY** visits. Please be aware that refills may take up to **72 HOURS** to process, so please plan accordingly. Your refill request may be denied should you fail to comply with our policy.

TELEPHONE MESSAGES & PROCESSING OF REFERRALS

We will try our best to respond to your messages as soon as possible. However, please be aware that messages may take up to **24 HOURS** to process and respond. More often than not, if your questions require extensive attention, your providers may elect to have you make an appointment and come for further evaluation for quality assurance purposes. Likewise, due to the nature of insurance-based healthcare, please also allow **48 to 72 HOURS** to process your HMO specialist referrals.

FMLA & DISABILITIES FORMS

In general, we **do not** complete or perform **Long-Term DISABILITY Forms & Evaluations**. We **do require** that **FMLA Forms & Short-Term DISABILITY Forms** be completed **IN PERSON** during our regular office hours, at which time our providers may refer you to appropriate specialists for further evaluation and management.

MEDICAL RECORDS & FORMS

All requests for medical records must be on a HIPPA approved form, which must be properly and completely filled out and signed by the patient or legal guardian. Improperly filled out forms may delay your request. Please allow **at least 5 BUSINESS DAYS** for processing.

Medical records released to a new provider, specialist or school: For continuity of care and as a courtesy to the patient, our office will forward records requested at no charge.

Medical records released to the patient, some insurance companies, law firm or miscellaneous requests: Records are subject to copying fees.

AFTER HOURS

When an **EMERGENCY** arises, and you need to get in touch with our on-call service, you may call our office at (469) 714 - 0138. You will be directed to our on-call service personnel, who will then provide you with appropriate instructions. As a reminder, this option should only be used for **emergencies**. Please be aware that as a general rule, we **DO NOT** call-in **antibiotics and/or medication refills**, and under **NO CIRCUMSTANCES** will **narcotics** be called to the pharmacy.

IN A LIFE THREATENING SITUATION, PLEASE CALL 911 IMMEDIATELY.

Our friendly staff is committed to making your visit as pleasant as possible. Your comments or concerns are important to us. We rely on them to continue to improve our quality medical care to you and your family.