

Physicians East Financial Policy

Thank you for choosing Physicians East as your health care provider. We are committed to building a successful provider-patient relationship. Your understanding of our Practice Financial Policy and payment for services are important parts of this relationship. For your convenience, this document addresses a few commonly asked financial policy questions. If you need more information or assistance with any of these policies, please speak to our Billing Department or call 252-752-5029.

When are payments due?

All copayments, deductibles, patient responsibility amounts, and past-due balances are due at the time of check-in. If you owe additional money after your visit, you will receive a statement. Statements are sent out monthly by mail, email or text. Payment is expected within 10 business days of receipt of your statement.

Can you waive my copay?

Physicians East cannot waive deductibles, coinsurances, or copays required by your insurance company. This is a violation of insurance rules that extend beyond Physicians East control.

How may I pay?

We accept payment by cash, check, VISA, and MasterCard. The payment portal is also available on our website.

Will you bill my insurance?

Insurance is a contract between you and your insurance company. We are not a party to this contract. While we are not able to participate with every insurance company, if we have the appropriate information we will file claims with all insurance companies as a courtesy to you. To properly bill your insurance company, we require that you disclose all insurance information, including primary, secondary, and tertiary insurance, at the time of service. If you become aware that our records do not accurately reflect your current insurance, please reach out to us immediately to correct the information.

It is your responsibility to notify our office promptly of any patient information changes (i.e., address, name, insurance information) to facilitate appropriate billing for the services rendered to you. Failure to provide complete and accurate insurance information may result in Physicians East not being able to file the claim for you and the entire bill being categorized as a patient's responsibility.

Although we may estimate what your insurance company may pay, it is the insurance company that makes the final determination of your eligibility and benefits. You are responsible for all amounts not covered by your insurance company. If your insurance company is not contracted with us, you agree to pay any portion of the charges not covered by insurance, including those above the usual and customary allowance. If we are out of network with your insurance company and your insurance pays you directly, you are responsible for payment and agree to forward the payment to us immediately.

What if I cannot pay the amount due at the time of check-in?

Non-urgent services may be rescheduled if payment arrangements are not made.

Will I receive statements?

It is our office policy to send monthly statements. Patients may choose to receive paper statements or e-statements and by text.

Do I need a referral or pre-authorization?

If your insurance plan requires a referral authorization from your primary care provider or a pre-authorization from your insurance, you will need to contact your primary care provider or insurance company to be sure it has been obtained. If we have yet to receive authorization prior to your appointment time, we will reschedule. Failure to obtain the referral or preauthorization may result in a lower or no payment from the insurance company, and the balance will become the patient's responsibility.

Which insurance plans do you contract with?

Physicians East accepts most major insurance plans. However, with the frequent changes that happen in the insurance marketplace, it is a good idea for you to contact your insurance company prior to your appointment and verify if we are a participating provider as per your plan.

What if my plan does not contract with you?

If we are not a provider under your insurance plan, you will be responsible for paying the minimum required payment for self-pay patients (See section *What am I required to pay if I do not have insurance) at the time of service. As a courtesy, however, we will file your insurance claim, and if not paid within 45 days, you will be responsible for the bill. After your insurance company has processed your claims, any amount remaining as a credit balance will be refunded to you.

What is my financial responsibility for services?

It is your responsibility to verify that the providers and the practice where you are seeking treatment are listed as authorized providers under your insurance plan. Your employer or insurance company should be able to provide a current provider listing.

The patient or the patient's legal representative is responsible for all charges for services rendered. "Non-covered" means that a service will not be paid for under your insurance plan. If non-covered services are provided, you will be expected to pay for these services at the time they are provided or when you receive a statement or explanation of benefits (EOB) from your insurance provider denying payment.

Your insurance company offers appeal procedures. We will not under any circumstances falsify or change a diagnosis or symptom to convince an insurer to pay for care that is not covered, nor do we delete or change the content in the record that may prevent services from being considered covered. We cannot offer services without expectation of payment, and if you receive non-covered services, you must agree to pay for these services if your insurance company does not. If you are unsure whether a service is covered by your plan it is your responsibility to call your insurance company to determine what your schedule of benefits allows, if a deductible applies, and your financial responsibility.

What if I do not have insurance?

Physicians East has an Uninsured Community plan for patients without insurance coverage. This payer, solely used by Physicians East, identifies individuals that have full financial responsibility for their account and applies the appropriate fee schedule. The fee schedule assigned for patients without insurance coverage is the same fee schedule associated with Medicare. Patients with full financial responsibility despite having insurance coverage will be assigned the fee schedule of their insurance company. Applicable adjustments will be applied based on the fee schedule associated with your insurance.

What if my insurance pays late?

As a courtesy to you, we bill your insurance company for services on your behalf. If any insurance company fails to process payment for services within 45 days from the date of the claim submission, the total balance will be determined to be the patient's responsibility.

What am I required to pay if I do not have insurance?

Self-pay patients must pay a minimum of \$90 at check-in. Any remaining balance from the services rendered will be billed to the patient. **Note: minimum payments are higher for OBGYN and diagnostic services.

The minimum payment at check-in and timely payment of the remaining balance is required to continue participation in the Uninsured Community plan. This plan is considered a patient benefit since payer adjustments are applied to charges. Physicians East is not required to provide this benefit and may determine a patient is ineligible if the plan is abused.

What if I am unsure if I have insurance coverage for services?

It is always the patient's responsibility to know if our office is participating in their plan. If there is a discrepancy with our information, the patient will be considered self-pay unless otherwise proven. See "What am I required to pay if I don't have insurance" above.

What happens if my account is past due?

As a private practice, we do not receive financial assistance from outside sources. Receipts from services rendered pay for the practice expenses. As such, timely payment for services rendered is required to continue your care with our practice.

Accounts with unpaid balances for 90 calendar days or more will be sent to an external collection agency. Unpaid bills may result in non-urgent care being rescheduled until payment arrangements are made up to and including termination of the physician patient relationship and dismissal from the practice.

Past due accounts which have been turned over to a collection agency may hinder your ability to schedule non-urgent appointments which, in turn, may impact other services such as prescription refills. Appointments scheduled before the account is past due and walk-in services at Physicians East Urgent Care may also be declined.

In the event an account is turned over for collections, the person financially responsible for the account will be responsible for the costs associated with collections. Regardless of any personal arrangements that a patient might have outside of our office if you are 18 years old or older and receiving treatment, you are responsible for payment of the service. Our office will not bill any other personal party.

Can I set up a payment plan?

Payment plans are available for balances greater than \$100.00. Monthly payments are calculated to ensure balances are paid in full within six to twelve months. Auto-draft is required to be eligible for establishing a payment plan.

At the sole discretion of the practice, payment arrangements for non-elective services may extend to eighteen months for patients with balances over \$2,000. Please speak with our billing department to discuss a mutually agreeable short-term payment plan. It is never our intention to cause hardship to our patients, only to provide them with the best care possible and reasonable costs.

I received a bill even though I have secondary insurance.

Having secondary insurance does not necessarily mean that your services are 100% covered. Secondary insurance policies typically pay according to a coordination of benefits with the primary insurance.

Do you bill Worker's Compensation?

No, your employer must provide prior authorization for services resulting from a worker's compensation injury. Physicians East does not bill Worker's Compensation. Check with your employer to determine where you need to seek care.

What if I need surgery?

If your provider recommends surgery, your surgery will be scheduled by your provider's staff. The staff member can answer specific questions about the surgery scheduling process, discuss the paperwork and tests involved, and assist with completing all prior authorizations your insurance company might require.

Our office will require a pre-surgical deposit equal to the amount of your copayment/deductible to go toward your surgery copayment, deductible, or any other amount your insurance carrier deems to be the patient's responsibility. After your insurance company has processed your surgery claim, any amount that may remain as a credit will be refunded to you.

Please note that Physicians East only bills for services rendered by our clinical team during the procedure. The hospital or other providers will bill you for other services provided—which might include operating room costs, anesthesia costs, pathology, reading fees, other doctor's charges, etc.

Why did I receive a bill from another facility?

Some services require additional processing or advanced services beyond the typical scope of a private practice. You may be billed separately for pathology, anesthesia services, radiology interpretation services, reading fees and laboratory testing.

Why did I receive a delayed bill for more laboratory services?

Some laboratory tests require additional testing once the results are determined. This is called reflexing. You may receive a delayed bill for tests that were ordered as a reflex.

What are the payment requirements for services that are part of a global fee?

Some services are part of a package of visits, such as routine obstetrical care. Patients must establish a payment plan for the expected balance of these services. Due to the frequency of these services, payment plans may be limited to a shorter repayment period.

Do you provide cost estimates?

Cost estimates are readily available to patients for all services. Our practice management software has functionality that will help determine payer coverage and the patient's monetary responsibility. Contact the billing department for assistance.

Do you bill other third parties?

We do not bill third parties for services rendered to you. Our relationship is with you and not with the third-party liability insurer or policy carrier (i.e., auto or homeowner). It is your responsibility to seek reimbursement from them. You will be asked to pay in full for the services we provide you. All formalities required by your insurer and the third party should be promptly completed by you. If we receive a denial of your claim, you will be responsible for payment in full.

What if I have billing or insurance questions?

Physicians East is supported by a staff of dedicated professionals. Our office staff can assist with most financial questions. Insurance plan inquiries should be made to your insurance company. Please ask if you have questions about our fees, policies, or responsibilities or call 252-752-5029.

Do you refer unpaid bills to collection agencies?

If a patient cannot pay the balance on their account according to the financial policy, the patient/guarantor will be referred to an outside collection agency or an attorney for further action. Non-payment for services may impact the patient's credit rating.

What if my child needs to see a provider?

A parent or legal guardian must accompany patients who are minors on the patient's first visit. This accompanying adult is responsible for payment of the account, according to the policy outlined on the previous pages.

Do you charge a penalty for returned payments?

Any charges incurred by the practice collecting balances owed to us during the collection process will be charged to the patient. Returned checks, credit card chargebacks, or returned payments will result in a minimum \$25 penalty in addition to the balance owed. Accounts with returned payments will be expected to make payments via cash.

What if I overpay?

A refund is issued when an overpayment has been identified. If overpayment has occurred, the overpayment will be applied to any open balances on the account. If there are no open balances on the account, Physicians East will refund the overage within 45 days of receiving notice of overpayment.

I have a hardship. How can you help me?

In some cases, if the minimum payment due cannot be paid, we will need proof of financial hardship. We may be forced to pursue collections of balances without tangible proof of hardship.

Do you accept Patient Assistance programs?

Physicians East contracts with an outside service that assists with finding various types of funding assistance for patients in need. If you feel you may qualify to participate in these programs, please contact the billing department for assistance. Financial information of the patient is required to determine eligibility in most cases.

Can I give another person access to my billing information?

If you would like anyone else to be able to discuss your account with us, you must complete an authorization form giving permission to do so.

Do you charge for completing forms?

Completing disability forms, FMLA (Family and Medical Leave Act) forms, and other requested supplemental insurance forms requires time away from patient care and day-to-day business operations. A fee of \$25.00 per form is charged. Please understand that to complete forms, your medical record must be reviewed, forms completed and signed by the provider, and copied into your medical record. Some of these forms can be quite complicated and tedious to fill out. Please provide us with pertinent information, especially dates of disability and return to work. We request that you allow 7-10 business days for this process. Payment is due when the form is provided to the practice for completion.

Do you charge for copies of medical records?

There is no charge for sharing medical information with another healthcare provider or sharing information via our patient portal.

A charge for labor, supplies, and postage (if mailed) will be charged for paper copies. Records requested via electronic media (flash drives, CDs, DVDs, etc.) will result in a charge of \$6.50.

Attorneys and other third parties requesting medical records will be charged fees based on the number of pages copied.

- \$0.75 per page for pages 1-25
- \$0.50 per page for pages 26-100
- \$0.25 per page for each page over 100

The above fees do not apply for records requested for Worker's Compensation (Worker's Comp is not accepted by Physicians East) or Disability Determination.

What if I missed my appointment to see the provider?

Our highly skilled providers are committed to your well-being and have reserved time to see you. If you need to reschedule or cancel your appointment, we kindly ask that you contact us in advance of your appointment so this time can be given to another patient in need. Failure to notify our office 24 business hours before your appointment may result in a no-show fee. No show fees range from \$75 to \$400 depending on the service scheduled for you.

Consistently missing appointments, a pattern of three or more times, may also result in termination of the patient-physician relationship and dismissal from the practice may occur. Dismissed patients must find a provider outside of Physicians East for future services, prescription refills, daytime and after-hours medical advice, portal communication, and walk in immediate care services from Physicians East Urgent Care.