

**Durham Family Medicine** is committed to the success and quality of your medical care and is honored to be your medical home. For your convenience, we have provided some general information about our policies and what you can expect from the services we offer. Please let us know if you have any additional questions or concerns.

**Personal information:** We verify insurance cards and request updated demographic information at each visit. This will ensure that we process accurate billing for you and your insurance company. If you do not have your insurance card available at the time of the visit, we may ask that you reschedule your appointment until you can present your card. If you have recently had a change in address, or have a new contact phone number or e-mail address, please offer that information at the time of check in.

**Visiting our practice**: We strive to provide a quiet and peaceful area for every patient waiting for an appointment. For that reason, we ask that no cell phones or video games be used while in the building; particularly in the waiting area, lobby and exam rooms. Parents are expected to monitor their children's behavior, thereby ensuring that all visitors experience a calm environment while waiting to see their provider. As a courtesy to all, we ask that patients bring no more than 1-2 family members when visiting us.

When children need to see the physician: Parents or legal guardians must accompany all patients who are minors and sign a statement accepting responsibility for the account. Minors between the ages of 15-17 who are able to come by themselves must have permission in writing from a parent or legal guardian to have treatment of any type unless related to pregnancy or possible venereal disease. The legal guardian or parent must also be available by phone for questions and possible consent to treat. A minor is considered anyone under the age of 18. Patients 18 and older may be considered financially responsible for payment when seen without a parent or guardian present.

**Missed appointments:** As a courtesy, we attempt to contact every patient to remind them of their appointment in advance. However, it is the responsibility of the patient to arrive for their appointment on time. Cancellations should be received 24 hours in advance. Patients who have missed three or more appointments within a 6-month period will be dismissed from the practice.

**Financial responsibility:** As a patient, you are ultimately responsible for all services provided. Because "coverage" depends on a variety of factors, it is extremely important that you fully understand what your coverage includes. We strongly recommend that you call your insurance carrier prior to your visit(s) with us, as they may require specified time periods between visits, such as annual physicals or certain diagnostic procedures.

Payments: We accept payment by cash, check, money order and most major credit cards.

**Medication:** New and prescription re-fills can be handled most directly if you check your prescription bottles before your appointment and request prescriptions during your visit with the provider. For all refill requests outside of appointments, please CONTACT YOUR PHARMACY. They will electronically notify us of your request. If your prescription for a maintenance medication is out of refills, you may be due for an appointment and/or necessary lab work. Narcotic pain medications require written prescriptions and will not be called into the pharmacy. NC law prevents us from refilling prescriptions for controlled substances (for pain, ADHD, etc.) without having a "face-to-face encounter" (office visit) with the patient in advance. **No narcotic prescriptions will be called in after-hours.** 

**Referrals:** If our provider requests an urgent referral for diagnostic procedures, we will make every effort to process the referral on the same day if time allows. All referrals to specialists or for non-routine diagnostics will be handled within 5 working days. Please make sure our office staff has the best phone number to reach you in order to communicate your appointment information. We will make every effort to insure that the specialist accepts your insurance, but it is the patient's responsibility to confirm that a specialist is covered by his/her specific insurance plan prior to a visit.

**Prior Authorization:** Some insurance policies require prior authorization for radiology studies, referrals or certain prescription medications. This may cause a delay in scheduling appointments to facilities outside this office or obtaining non-urgent medications. Our office will file the appropriate forms in a timely manner, and you will be notified of the insurance company response promptly. Please allow 4-54 business days before calling our office to request a status update or approval confirmation.

**Forms:** Disability, employer, Family Medical Leave Act (FMLA), insurance forms, or any other paperwork that requires your provider's input can be very time consuming for both you and your provider. Please be sure to <u>complete all required information prior</u> <u>to submission</u> to your provider. You may be asked to schedule an appointment with your provider to review the requested information. If a provider agrees to complete a form which has been submitted outside a scheduled visit, a standard fee will be charged, depending on the amount of time required for review and completion. These fees are administrative fees and will not be filed for insurance reimbursement.

**Patient Dismissals:** We believe the physician/patient relationship to be a professional one based upon mutual trust. If a breakdown in this relationship occurs we reserve the right to refuse treatment. Reasons for dismissal include (not all-inclusive): Dishonesty, Aggressive or inappropriate behavior, Persistent non-compliance with treatment plans, Refusing to see and/or be treated by members of our staff, Illegal activity by patients or their caregivers, Patients or caregivers felt to be dangerous to self or others