

PRIME HEALTH ASSOCIATES, PLLC
dba BEAVER FAMILY CLINIC
dba CRAB ORCHARD FAMILY HEALTHCARE

Insurance Policy

Beaver Family Clinic and Crab Orchard Family Healthcare accepts the majority of all insurance carriers. Please contact our office or your insurance carrier for questions or further information.

To ensure that you get the maximum benefit from your insurance provider, we offer the following tips for your consideration.

If you belong to a PPO or an HMO that requires you to see a selected primary care physician, please make sure that you have selected Beaver Family Clinic or Crab Orchard Family Healthcare or one of its physicians before you are seen at one of our facilities.

Please contact your insurance company to inquire as to participation status. We may be participating providers contracted through another network. If we are not participating providers but you have out of network benefits, we can file your insurance for you. However, you will not get the network discounts and your benefits will be paid at the out-of-network rate.

If you have questions as to specific procedures performed in our office, you may contact our office for further information. If you have questions as to whether the services will be covered by your plan, you must verify benefits with your insurance company. Our office will not be responsible for claims denied due to policy provisions.

All insurance claims are filed electronically, if eligible. All other claims are sent on HICA 1500 paper forms. Turnaround time for insurance processing usually ranges from two weeks to 60 days.

Financial Policy

For your convenience, Beaver Family Clinic and Crab Orchard Family Healthcare accepts the following forms of payment:

- Cash
- Check
- Money Orders
- American Express
- Discover
- Master Card
- Visa
- Cashier's check
- Post-Dated Checks (with management approval)

To avoid any misunderstanding or disagreement concerning payment for professional services provided by our practice, please review the following information regarding our financial policy:

Prompt payment allows us to control costs. Outstanding accounts cost both of us time and money.

Our office will gladly file your insurance for you. However, it should be mentioned that your insurance coverage is an agreement between you and your insurer. It is your responsibility to remit payment for charges not covered by your claim and ensure your carrier remits payment. If a problem occurs with your claim, you will be required to pay any disputed amount. Should your insurance pay your claim at a later date, you will be refunded any overpayment.

We encourage you to look at statements you receive from your insurance company and retain them for your own records. If you do not understand the explanation of benefits (EOB), please call your insurance company.

Co-payment/Co-insurance

If your insurance requires a co-payment for office visits, you will be required to pay the co-payment amount in advance. The receptionist will ask you for your co-payment. Please have this amount ready upon check-in. If you do not have your co-payment, your appointment may be rescheduled to a later date.

Per our managed care contracts, a co-payment is required each time a patient presents for services with a physician, physician assistant, nurse practitioner, or a nurse. If your insurance requires you to pay a co-insurance (percentage) or a deductible amount, this amount will be estimated by the receptionist and collected at the time of your visit.

You will be sent a statement for any remaining balance once insurance payment/denial is received. Any overpayment will be refunded to the patient. *****Please note that you must bring your insurance card with you to each visit and provide us with any change in coverage immediately.**

Self-Pay Patients

Patients presenting for services without insurance are required to pay a deposit toward their office visit. Should your provider indicate that your level of care exceeded this deposit (based on complicated history, medical decision making, labs, X-rays, injections, etc.), you will be mailed a statement for the remaining balance. If your balance (after making the initial deposit) is paid in our office within 30 days, you will be entitled to a 25% discount on the balance. Simply deduct 25% from your billed amount and indicate "cash discount" on your payment.

Monthly Statements

By law, all patient accounts are due and payable within 30 days of services being rendered. As a courtesy, our practice will establish a reasonable monthly payment plan to accommodate your needs. Each month you will be mailed a monthly statement for services, which is due and payable within 30 days.

If your payment is late, or if you have not previously made financial arrangements, then we will mail a reminder notice indicating there is a problem with your account. Failure to send regular

monthly payments will result in your account being delinquent and your account will be turned over to our collection service. **In the event you file bankruptcy or are turned over to collection, you will be denied services and will be asked to seek treatment elsewhere.**

If you are experiencing a set of circumstances that are beyond your control, please call our practice, and we will be happy to make special arrangements.

Medical Record Services

Your Protected Health Information (PHI) may be released to another healthcare provider one time free of charge. Thereafter, you agree and understand that you are financially responsible for the fees associated with your request. Also if you request your PHI for your own inspection or to hand deliver it to another physician, you are financially responsible for the fees associated with your request.

Radiology Services

X-ray studies and Ultrasound are performed at Beaver Family Clinic but are not read by the clinic physicians. X-rays and Ultrasounds are read by Beckley Medical Imaging and Echocardiograms are read by a cardiologist. You will receive a separate bill from them for their professional reading services. All films and x-rays are subject to be destroyed after 5 years. Exception: an adolescent study will be kept until they turn 21 years old.

We look forward to assisting you in your healthcare needs.

Signature: _____