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# **Financial Policy of West Front Primary Care**

We are committed to providing you with quality and affordable healthcare. It is our policy that payment is expected to be paid on the date of service or by securing payment by placing a credit card on file. This policy represents an outline of your patient financial obligations. We encourage you to read over it carefully and ask any questions for clarification.

### **Appointments:**

- 1. **No Show, Late Canceled or Arriving Late to Appointments** Patients must provide at least 24-hour notice when unable to keep an appointment. If you miss your appointment, cancel your appointment with less than 24-hour notice or arrive too late to be seen, you will be charged a \$50 administrative fee. Please be advised that three missed/canceled/late appointments within a rolling year, may be the grounds for discharge from our practice.
- 2. **Extended Care Fee** For appointments after 5:00pm during the week and all Saturday appointments, there is a \$25 after hours extended care charge added to your visit.

#### **Insurance:**

- 1. **Designating your West Front Primary Care Provider as your Primary Care Provider (PCP)** If you are seeing a provider here as your primary care provider you must ensure that your insurance carrier is made aware of this to ensure you are charged the correct co-pay or fee. Otherwise, your carrier may charge you a specialist visit co-pay or may not cover the visit at all.
- 2. **Verification of Identity** To prevent fraud, each visit you will be asked to verify your identity, current address, phone number and your current insurance card(s), if you have insurance.

### **Financial Obligations:**

- 1. Co-Payments, Co-Insurances and Deductibles:
  - We accept payments by cash, check, credit cards (VISA, MasterCard, Discover or American Express) debit card, and HSA card.
  - We can securely keep your credit card on file using a third-party vendor as a convenient method to pay for services not paid by your insurance. Many patients take advantage of this convenient payment method, and we strongly encourage patients to do so.
  - O Payment is expected on the date of service and includes deductibles, co-pays, co-insurances and non-covered charges. Adding a credit card on file meets that expectation.
  - A \$25 administrative fee will be added to your account in the event that payment is not received within 24 hours of the date of service.

Your Healthcare Desti	ination.
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- 2. If we participate with your insurance company:
  - We will submit claims to your insurance company as a courtesy to you. Your financial obligation must be paid on the date of service.
  - O Non-covered Services If your insurance company does not cover a given service that you have received, then payment in full will be required at the time of service. The provider's decision to order tests, x-rays, labs and other medical services is based on your health care needs, not your insurance coverage. It is your responsibility to know your insurance coverage before any services are rendered.
- 3. If we do NOT participate with your insurance company, payment in full will be required at the time of service. We will file a claim to your insurance company as a courtesy to you, and you will receive the money directly. With Health Share Plans, we will not submit the charges for you, that will be your responsibility.
- 4. Self-pay patients will be expected to pay in full at the time of service. A discount on selected services is available, but only if there is a payment in full on the date of service.
  - Exempt from any discounts include, but are not limited to: School sports physicals, Department of Transportation (DOT) physicals, FFA exams, Travel Consults, IUD's, and Vasectomies. If your employer is responsible to pay for your services, then payment at the time of service must be pre-arranged with our Billing Department.
- 5. Patient Refunds: Patient refunds are processed monthly.
- 6. A \$50 fee will be charged for any checks returned by the bank.

# **Referrals:**

- 1. Emergency referrals will be completed on the same day.
- 2. Not all insurance companies allow retroactive referrals. If requested, they cannot always be honored.
- 3. Some referrals require preauthorization and can often take a week or more. They DO NOT guarantee that your insurance will pay for your services in full and you may still have some out-of-pocket expenses.

### **Patient Records:**

1. If you transfer to another provider, we will provide a copy of your West Front Primary Care record to that provider free of charge. For records from other provider offices, we will fax a signed release form to them, as a courtesy to you. Patients must complete a signed Medical Records Release Form to transfer records to another office.



2. If you personally wish a copy of your patient health records, they are available, however a fee will be charged. Please allow up to 30 days for processing. Many records are already available to you free of charge on your patient portal.

# Forms and Fees:

There may be an additional fee for reviewing and completion of forms for school, camp, sports, health assessment, handicap parking, insurance, family and medical leave act (FMLA) forms. Payment is due when the forms are picked up. A minimum of three business days is required for completion.

# **Auto Accidents:**

Patients must inform the staff and your provider when a visit may be auto accident related. You will need to complete a form that provides us with the necessary billing information. You are responsible to know if your health insurance will be billed primary to your auto insurance. You will be responsible for charges until the Billing Department receives your completed and verified form.

### **Workers Compensation:**

We are not accepting any workers' compensation claims.

# **No Surprises Act:**

Federal Regulation requires provider and facilities to provide uninsured and self-pay patients with a Good Faith Estimate (GFE) of the cost of expected care. The GFE may be provided upon scheduling your appointment or any time prior to the appointment date. For more information see Patient Resources at www.westfrontprimarycare.com or call 231-935-8930 ext. 807.



# **PATIENT QUICK REFERENCE GUIDE**

It is the patient's responsibility to know their deductible, co-pay, co-insurance and coverage for services.

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Your Plan	What you Do	What West Front Primary Care Does	
Medicare	Pay your deductible and co-insurance or place a credit card on file.	We will file Medicare.	
Medicare and a secondary insurance	Collect Medicare deductible at the time of service or place a credit card on file for balances due.	We will submit claims to Medicare and your secondary insurance.	
Medicare and Medicaid	No payment due at time of service.	We will check your Medicaid eligibility before every visit and will file Medicaid.	
Medicaid Plans	No payment due at the time of service.	We will check your Medicaid eligibility before every visit and will file Medicaid.	
Medicare Advantage	Pay deductible, co-pay, and coinsurance at time of service or place a credit card on file.	We will file your Medicare Advantage insurance.	
Blue Cross/Blue Shield	Pay deductible, co-pay, and coinsurance at time of service or place a credit card on file.	We submit a claim to BCBS insurance.	
Priority Health and BCN	Your insurance must list your PCP as a WFPC Provider Pay deductible, co-pay, and coinsurance at time of service or place a credit card on file.	We will file to Priority Health/BCN insurance for you.	
Others WFPC participates with, such as Cigna, Aetna, United Healthcare	Pay deductible, co-pay, and coinsurance at time of service or place a credit card on file.	We will submit a claim to your insurance.	
Insurance we Do Not participate with	Pay for the visit in full at the time of service.	We will submit a claim to your insurance and assign the benefits to you so you will receive the payment.	
Worker's Compensation	West Front Primary Care does not accept Workers Compensation claims.		
Auto Accident	You must have opened a claim with your insurance company to be seen. You must find out who is primary and fill out the "Auto Accident Form".	We will submit a claim to your insurance company.	
Self-pay	Pay for the visit in full at the time of service.	We provide a discount for eligible services when full payment is made on the date of service.	
Tricare East	Pay for the visit in full at the time of service.	We will submit a claim to your insurance and assign the benefits to you so you will receive the payment.	
Health Savings Account (HSA	Pay deductible, co-pay, and coinsurance at time of service or put your HSA card on file.	We will submit a claim to your insurance.	
HRA	If your insurance does not generate a payment automatically, you must authorize a payment.	We will submit a claim to your insurance.	