

**PROGRESSIVE MEDICAL ASSOCIATES
INSURANCE INFORMATION & OFFICE POLICIES**

INSURANCE PLANS THAT WE PARTICIPATE WITH: We participate with most major health insurance plans. However, we encourage you to check with your insurance company to verify in-network status with your plan. It is not possible for us to keep up with the requirements and limitations of every new insurance plan. **NOTE: We are NOT in-network for Blue Local, Ambetter, Aetna CVS and Blue “High Performance” Network (HPN). These plans are affiliated with Atrium Health. We are also NOT in-network for Blue Home with Novant Health and GHI (Emblem Health), or Carolina Complete Tailored Plans.** NC Medicaid managed care plans that we participate with are Healthy Blue, WellCare, and Carolina Complete Health.

VERIFICATION OF INSURANCE: Please bring your insurance card to every appointment. If we are unable to verify your insurance eligibility, you will be required to pay for your visit. If you provide us with valid insurance in a timely manner, we will file your claim and will refund any overpayment.

NON-COVERED SERVICES: Although we will do our best to notify you if we suspect a test or service will not be covered, it is ultimately your responsibility to review your plan or contact your insurance company for clarification. This also applies to any services you receive outside our office as a result of a referral from us. Please remember that even though a service is “covered”, you may still incur a cost, as it may be subject to deductibles or coinsurance.

ANNUAL WELLNESS EXAMS: Although most insurance plans cover wellness exams with no co-pay or deductible, only “preventative” services are covered. If an abnormality is encountered or a pre-existing problem is addressed at the same visit, an additional service may be billed, which may result in a co-pay (or deductible) charge, depending on your coverage.

LABORATORY / PATHOLOGY: The lab we use is Lab Corp. This lab should be in-network for all major insurance plans (except GHI). Please notify the lab tech if you are aware of any specific labs your insurance company requires you to use. You may receive a bill from Lab Corp, depending on your benefits.

NO SHOW POLICY: If you are unable to keep a scheduled appointment, please notify our office at least 48 hours prior to the appointment. A fee may be charged for no-shows or last minute cancellations. Patients who habitually no-show will be dismissed from the practice.

LATE ARRIVALS: If you arrive 15 minutes or more for your scheduled appointment, you may be asked to reschedule on another day or take another open appointment on the same day.

CONTROLLED SUBSTANCE PRESCRIPTIONS: Refilling controlled substances outside of follow-up office visits required thorough documentation and is closely monitored by the DEA. Your provider must conduct chart audits to make sure the refill is appropriate and search the NC controlled substance database. Therefore, we strongly urge all patients to get refills at their scheduled appt time. If a prescription is lost or a refill must be done outside of a regular appt time, we will charge an administrative fee of \$25 per prescription for the required documentation. **Patients are required to schedule and complete an appointment every 30 to 90 calendar days or less with their provider, when taking a controlled substance medication prescribed by our clinic. Patients must additionally sign a Controlled Substance Agreement on an annual basis, to be uploaded into your chart for documentation purposes, as required by law.**

FOLLOW-UPS AND COMPLIANCE: Our office works to provide the best healthcare possible which means if you have chronic medical conditions (particularly conditions that require ongoing prescriptions), you will need to be seen periodically. For example, diabetics need to be seen every 3 months as this condition needs to be managed intensively for the best health outcome possible. Patients on chronic medications (antidepressants, blood pressure, cholesterol, thyroid, etc) need to be seen at least every 6 months. We need to document that patients are doing well on their medications, monitor for any unusual side effects, and sometimes obtain current labs and try to give enough refills to last until your next routine follow up visit. If you are running out of medication, you are likely due for a follow up. **If you are overdue for a follow up, we cannot give you a 3 month refill.** In some situations, we may be able to do a telephone visit if you are unable to come in.

RETURNED CHECKS: A charge of \$25.00 will be added to your patient account if a check is returned for insufficient available funds. We may also require that future payments be made by cash or credit card.

SELF-PAY PATIENTS: Payment is due in full at the time of service unless prior arrangements have been made, including for lab draws.

COSMETIC PROCEDURES: Pre-payment (cash or credit card only) is required for the estimated fee for cosmetic procedures. Cosmetic appointments cannot be scheduled until any past due balances for medical services are paid.

DELINQUENT ACCOUNTS / FINANCIAL ASSISTANCE: We realize that on occasion temporary financial problems may affect timely payment of your account. If such problems arise, please contact us promptly, as we are more than willing to work out payment arrangements; we may be able to reduce the balance for those who meet particular qualifications for financial hardship. Accounts that are persistently delinquent will be referred to an outside collection agency and may ultimately result in dismissal from the practice.