



## Coverage and Payment Agreement

Please read this form carefully. We want to make sure you understand what services Hope Wellness Center (HWC) can pay for and what we cannot. If you have any questions, please ask a staff member before signing.

### **Hope Wellness Center is not an Insurance Company**

HWC is a nonprofit organization that helps cover certain medical costs for our patients. We are **not** an insurance company.

- HWC will only pay for services that are **approved in advance** by our providers.
- Patients should not tell other clinics, hospitals, or labs that HWC is their insurance company—we are not your insurance company.
- If another provider sends a bill to HWC that we did not approve in writing, **we will deny the charge**.
- If you choose to use another lab, such as Labcorp or Quest, **HWC will not pay for any part of that bill** under any circumstances.

### **Authorized Care Only**

HWC will **not cover** any prescriptions, tests, or other care ordered by providers outside of HWC unless you have written authorization from HWC before you receive that care.

### **Approved Labs, Radiology, and Specialist Visits**

For all lab work, radiology, and specialist follow-up visits:

- HWC works only with Bayhealth laboratories and providers.
- For radiology, HWC works only with Bayhealth and Delaware Imaging Network.
- We will pay only for bills sent to HWC by Bayhealth and/or Delaware Imaging Network unless HWC gives you written permission to go elsewhere.

If an HWC provider refers you to a specialist:

- HWC will pay only for the cost of the first consultation visit unless we approve more in writing.
- HWC may not cover the cost of any tests, procedures, prescriptions, or other care the specialist recommends.

**Continued on next page.**



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### Approved Pharmacies and Prescription Refills

HWC will pay only for prescriptions filled at one of our partner pharmacies:

- **Atlantic Apothecary:** 103 S. DuPont Blvd #2, Smyrna, DE 19977
- **Rodney Village Pharmacy:** 1664 S. Governors Ave, Dover, DE 19904

We will cover:

- Prescriptions written by an HWC provider during your appointment, and
- Refills that are part of that same prescription.

If you need additional refills after the original prescription runs out, you may be asked to return for another medical visit and/or complete a new eligibility screening before HWC can approve payment.

### Agreement

By signing below, I confirm that I:

- Have read and understood the information above.
- Understand that HWC is not an insurance company.
- Understand that HWC will only pay for care, tests, and prescriptions that are authorized in advance and are provided through approved partners.
- Accept that I am responsible for any charges not approved by HWC as described in this agreement.

Patient Name: \_\_\_\_\_

Patient Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_