

Charleston OB/GYN

INSURANCE

Please be aware that insurance will **not** cover certain of our office fees:

- No Show Fee (\$30) - There is a \$30 charge for a no-show or for canceling an appointment with less than 24 hours notice. Your insurance company will **not** cover this charge. Payment of any outstanding no-show fees will be required to schedule another office visit.
- Physician forms/Paperwork Request-Forms Completion (\$35) - There is a \$35 fee for completing physician forms (e.g., Family & Medical Leave Act forms, Medical Necessity Forms, Department of Driver Services Forms, Disability Forms, Life Insurance forms, etc) Your insurance company will **not** cover this fee.

INSURANCE POLICY

It is our policy to file for **primary** insurance as a courtesy to you, if we have accurate and complete insurance information. If a service is provided that is not covered by your insurance company, you will be the responsible party at the time of service. Not all insurance companies pay for Physical Exams, Vaccines, or Procedures performed in our office. Please be aware of your insurance policies; payment for these services are your responsibility at the time that they are rendered, unless agreement is made in advance with our billing coordinator. If we have not received a payment from your insurance company within thirty (30) business days, you will be responsible for the balance due.

Deductibles, co-payments, coinsurance, and past due balances will be collected at the time of service. In special cases, we may need your help in contacting your insurance company for the payment of your services and therefore you must agree to fully cooperate in assisting us should that be necessary.

SELF-PAY PATIENTS

If you are a self-pay patient, you will be required to pay your balance in full at the time of service.

CHECK POLICY

Any returned checks will be re-deposited twice and if it continues to not clear it will be credited back to your account and a \$25.00 returned check fee will be added. You will have one week to return to the office with cash or money order.

In order to provide the best medical care, we ask that you do not discuss your account balance or financial aspects with the physician(s) or medical staff. Please discuss any account information with the check-out associate, front desk administrator &/or billing coordinator.

PAPERWORK REQUEST – FORM COMPLETION

The turnaround time to complete forms is 5 business days. We charge a fee for completing certain types of paperwork. The fee to complete forms is \$35.00. Payment in full will be collected when you pick up completed paperwork with an associated fee. Completed paperwork will not be released prior to receipt of payment in full of the Forms Completion Fee.

TELEPHONE CALLS, MEDICATION REFILLS

Our medical support staff has been trained to answer most questions. If they are unable to answer a question, your medical record will be reviewed and a staff member or physician will call you back.

We do not want you to run out of your medication. Please remember to call for medication refills during regular office hours. To ensure more timely refills, please call your pharmacy with the number on your prescription bottle. If your refills have expired, the pharmacy will call our office for permission to fill your prescription. Please allow 48 business hours for refills.

Charleston OB/GYN does not call insurance carriers for prior authorization of prescription medications. It is the patient's responsibility to have any required authorization form faxed to our office at 843-745-9428 by the insurance carrier each time authorization is required. Additionally, Charleston OB/GYN does require that you allow 72 business hour for completion and turn around of medication authorization forms once received in our office.

For your protection, an appointment may be necessary before refilling prescriptions for some medications including antibiotics and narcotics.

LABS, PROCEDURES, AND IMAGING

Our staff will notify you as soon as possible if any of your test results require prompt attention. You will be called only if you have an abnormal result. Otherwise, you may receive a report in the mail in 7-14 days summarizing your test results, depending on office policy.

REFERRALS

Some health conditions may require us to refer you to another specialist. You should be aware of the referral policies of your insurance plan. It may limit you to seeing only specialists that are affiliated with your health plan's provider network. Obtaining a referral through your insurance plan or a specialists' office is occasionally a time-consuming process and your patience is appreciated. We will do our best to meet your needs.