

Patient Financial Policy

We are committed to providing you with the best possible care and are pleased to discuss our professional fees with you at any time. Your clear understanding of our Financial Policy is important to our professional relationship. The **patient or responsible party** is responsible for seeing that the entire bill is paid in full.

We will ask to see your insurance card on your first visit and will copy your card for our record. We will ask for this information on a regular basis, at least once a year, in order to ensure that no change in benefits or carrier has occurred. Please notify us if your insurance carrier or policy has changed. **Billing of insurance is a courtesy we provide for patients.**

Copayments:

Your insurance **REQUIRES** that we collect your designated co-pay at the time of service. Please be prepared to pay the co-pay at each visit.

Deductibles and Co-Insurance:

AAPHC will bill your insurance company as a courtesy to you. If a coinsurance and/ or deductible apply, you are financially responsible for this amount.

Self-Pay/Uninsured:

Self-pay accounts shall exist if a patient has no insurance coverage or no evidence of insurance coverage. For new patients, a payment is required on the day of your appointment **before** being seen by the health care provider. AAPHC also offers the Sliding Fee Scale Program to assist our patients in financial need (qualification for the program is based on household income). Application including instructions is attached for those who wish to apply.

Referrals:

If your insurance plan requires a referral from your primary care physician it is your responsibility to obtain it prior to your appointment and to have it with you at the time of the appointment. If you do not have your referral, **YOU MAY BE REQUIRED TO RESCHEDULE.**

Workers' Compensation and Automobile Accidents

In the case of a workers' compensation injury or automobile accident, you must obtain the claim number, phone number, contact person, and name and address of the insurance carrier prior to your visit. If this information is not provided, you will be asked to either reschedule your appointment or pay for your visit at the time of service.

Extended payment arrangements

In certain circumstances, extended payment arrangements may be made with the Business Office. **The balance is to be paid over a three month period in equal monthly installments due by the first of every month.** Responsible parties who fail to make a monthly payment will be sent to a collection agency.

Divorce cases

In cases of divorce, the parent or legal guardian bringing (a) child in for care is responsible for payment at the time of service.

*If you have any questions regarding our Patient Financial Policy, please contact our **Billing & Claims Department Monday through Friday, 8:30 am to 5:00 pm at (229) 518-5140.** We are dedicated to providing the highest quality service to our patients and are happy to assist with your account.*

Albany Area Primary Health Care Specialty Services

Patient Portal

AAPHC offers you electronic access to your health information through our secured Patient Portal. This system allows you to review your health record online and also gives you the opportunity to communicate with our office electronically to schedule an appointment, retrieve tests results, or request medication refills. This service is provided as a benefit for our patients. If you are interested in this program, please let our registration clerk know.

Patient-Centered Medical Home

We practice under the Patient-Centered Medical Home (PCMH) model of care. This program is a way of saying that you, the patient, are the most important person in the health care system. A medical home is a process specific to how comprehensive health care is delivered to individuals. The team at Albany Area Primary Health Care, Inc. (AAPHC) manages your care and services for you—acting as the “hub” of your medical home. PCMH puts you, the patient, at the center of the health care system, and provides primary care that is Accessible, Continuous, Comprehensive, Community-Oriented, Coordinated and Compassionate.

Accountable Care Organization (ACO)

AAPHC is a member of the Accountable Care Coalition of Georgia which is an ACO. **Accountable Care Organizations (ACOs)** are groups of doctors, hospitals, and other health care providers, who come together voluntarily to give coordinated high quality care to their Medicare patients. Patients on Medicare may opt in or out of participation in an ACO. The ACO will use data from claim submissions to improve the availability of needed services for patients to improve their health status, and reduce ER visits and hospitalizations. The goal of coordinated care is to ensure that patients, especially the chronically ill, get the right care at the right time, while avoiding unnecessary duplication of services and preventing medical errors.

Medication Assistance Programs

AAPHC offers two prescription assistance programs (for qualifying participants) which help with the cost of medications.

The **Indigent Drug Program (IDP)** requires an approved sliding fee scale application on file and a minimal \$25.00 co-payment per year. If you utilize this program our IDP Facilitators will assist you and your provider with the applications for various patient assistance programs that are available through pharmaceutical companies. These applications are sent off for approval by our staff and if approved, your medications will be mailed to your provider’s office for pick-up.

There is also a **Prescription Savings Plan (P\$P)** which gives qualifying patients direct discounts on medications through participating pharmacies. These discounts may vary depending upon the medication(s) that you have been prescribed. Our medical providers are available to discuss this program with you specific to your medications at the time of your visit.

What to Expect From our Office



Always remember to bring in your medication(s) to each appointment.

Front Desk staff will update personal information at each appointment.



IMPORTANT:

If you are in need of a medication refill please call your pharmacy two weeks before medications are out and have them fax a medication refill request to our office. Please allow at least 72 hours to have a response answered.



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AAPHC works to provide our patients with timely, respectful and considerate healthcare health care services. We ask that you afford our staff and providers the same courtesies. If you are unable to keep your appointment, please call our office to cancel. We can reschedule your appointment at a more convenient time for you.

Patients who fail to call to cancel or reschedule are considered no-show appointments. We value your time and ask that you value our time as well. Three consecutive no-show appointments are justification for dismissal from our practice.



After hours services are available by calling your clinic office number which will connect you with our answering services. The answering service will have the on-call provider contact you.

If you receive care at an emergency room or urgent care center, please let us know by calling the main office within 48 hours so we can assist with follow-up care as needed.