

## PATIENT POLICIES

The physicians and staff of Wright State Physicians (WSP) are pleased to welcome you to our facility. We hope that your visit will be a pleasant experience. WSP firmly believes that a good physician/patient relationship is based upon mutual understanding and open communication. The patient policies listed below have been developed to address any questions regarding a patient's visit and account. If you have any questions or do not understand any of these policies, please feel free to contact our office at **(937) 245-7200**.

### **REGISTRATION**

Please note that WSP practices use a digital check-in process; you will be provided with a tablet upon arrival to complete all necessary information as indicated below.

Upon your initial visit to WSP, we will collect your billing and demographic information during the registration process. This information will include address, telephone number, social security number, date of birth, insurance information, employer information, emergency contact information, and other similar information. It is important that this information is kept up-to-date. Accordingly, at each subsequent visit, you will be asked to verify this information when you arrive for your appointment. In the event that any of the information has changed, you will be asked to update the information before seeing your physician.

### **MISSED APPOINTMENTS**

Please give at least a 24 hour notice (one business day) if you will not be able to keep your appointment. If you are a new patient, failure to show up for your initial appointment may result in the inability to reschedule. Repeated failure to provide an appropriate notice or accumulating three no shows in a 12-month rolling period may result in dismissal from all WSP practices.

### **DISMISSAL**

WSP views the provider-patient relationship as critically important to our ability to provide appropriate and safe care. If we are unable to create or maintain this relationship with you we may need to discontinue the relationship. Reasons that may deem this necessary include consistent no shows, noncompliance, or failure to adhere to our patient policies.

### **FMLA & DISABILITY FORMS**

If you require FMLA paperwork or disability forms to be completed, there will be a \$10 fee for each request and it will take up to 10 business days for completion. Payment is required prior to processing and can be made via credit, cash or check.

### **MEDICAL RECORD REQUESTS**

Upon receipt of a valid medical record release, your records will be released to you or the selected physician or facility of your choice. Please allow up to 10 business days for completion.

The medical record release form can be found at <http://wrightstatephysicians.org/for-patients>.

### **MEDICATION REQUESTS**

Medication requests or refills will be processed within 2 business days and must be requested and filled within business hours Monday through Friday 8:30am-4:30pm. We recommend contacting your pharmacy or using the Patient Portal to submit requests for medications. Calls made to the office for any prescriptions after-hours or over the weekend will need to be called into the office during regular business hours or they can be requested electronically via the Patient Portal to be processed within the next 2 business days. The on-call physicians will not have access to patient medication information.

If you are prescribed opioids, you will be required to sign a controlled substance agreement annually.

### **PAYMENT FOR SERVICES**

Payment for services provided is ultimately your responsibility. For your convenience, we accept cash, personal checks, Health Savings Accounts (HSA), Visa, MasterCard, AmEX and Discover. Our patient portal provides an easy and secure way to pay your bill. If you have a balance and are unable to pay it in full we can set you up on a payment plan. Our financial counselor can be reached at 937-245-7704.

## **HEALTH INSURANCE**

If you will be using health insurance to settle your account, you will be asked to present your current insurance card at each visit. If your insurance has out of pocket expenses (co-pays and deductibles), we will collect that amount at each visit.

We will file an initial claim based upon the information that you have provided to us. Under state law, your insurance company has 45 days in which to process and pay the claim, request more information, or deny the claim and notify us of the decision. If they have not notified us within 90 days of the date of service, it will be assumed that your insurance coverage is no longer in effect and the unpaid balance will be your responsibility.

To view a list of insurances we accept visit: <http://wrightstatephysicians.org/insurance>.

## **CARD ON FILE**

WSP has a card on file policy, which is a convenient method of payment in which we securely store your Health Savings Account (HSA), credit or debit card on file for services that your insurance doesn't cover. Please refer to the hand-out for more information on the process and terms for this agreement.

## **RETURNED CHECKS**

The fee for a returned check is \$30.00 payable by cash or money order. This will be applied to your account in addition to the insufficient funds amount. You may be placed on a cash only basis following any returned check.

## **WORKERS COMPENSATION CLAIMS**

Several of our physicians provide services under workers compensation plans. You will need to provide us with the case number as well as the address to which the claims are to be filed.

## **SELF-PAY PLAN**

If you are self-pay, you will be expected to pay for services rendered. You will be required to pay a \$100 deposit on the day of service for any office visits. There may be additional charges for testing and other services rendered subsequent to your visit. You will be billed for these items. If you are having surgery, you will be expected to make mutually agreeable payment arrangements prior to receiving the service. You will be required to pay at least a \$500 deposit prior to the procedure. If the service is considered elective, payment must be made in full prior to the services being rendered.

## **BILLING STATEMENTS**

We have designed our billing statements to reflect the individual charges billed, the payments and adjustments related to those charges, and the balance due. Patients with a personal balance will receive a monthly statement. Payment is due upon receipt. All payments are applied to the oldest outstanding balance.

## **PAST DUE ACCOUNTS**

Past due accounts cost both time and money; therefore, patients with delinquent accounts will be required to make payment at the time of service. If you are unable to make mutually agreeable payment arrangements, we will be glad to reschedule your appointment.

Those accounts failing to honor agreed upon payment terms will be sent to a collections agency and collection fees may apply. If your account is sent to a collection agency, patients and /or their immediate family members may be dismissed from all WSP practices for financial reasons. If this is to occur, you will be notified by regular and certified mail that you have 30 days to find alternative medical care.

## **TREATMENT FOR MINORS**

While Ohio law considers anyone under age 18 to have the consent of a parent or guardian before receiving medical treatment, there are expectations for emancipated minors and "mature minors" (over age 15 and who can show a health care provider that they have enough maturity and understanding to make medical care and treatment decisions). In addition, there are certain statutory expectations whereby a minor who understands the risks and benefits of proposed care can consent to: emergency healthcare, limited outpatient mental health care, alcohol and drug abuse treatment, testing for STI/HIV/AIDS, and some family planning services. A separate consent form will be signed by the minor at every visit for these exceptions.