

# SYMPHONY HEALTHCARE, INC.

## Office & Financial Policies

Welcome to Symphony Healthcare, Inc. Our practice policies (including financial information) are outlined below and have been created to maintain the highest level of care for our patients.

**Functional Medicine:** The main goal of Symphony Healthcare, Inc. is to implement a functional medicine approach. Functional medicine addresses the underlying causes of disease, using an approach that engages both the patient and the provider in a therapeutic partnership. While we do address primary care and chronic issues, we require our patients take an active role in managing their chronic symptoms and/or diseases.

**Appointments:** We see patients by appointment only. Same day appointments are usually available for urgent or sudden illness. We have a limited number of same day or “work in” appointments each day. Please call as early as possible, as these spots do fill up quickly. If there are no available appointments and you have to be worked in, please understand you may have an additional wait time.

**Cancellations& No Shows:** We require a 24 hour cancellation notice if you are unable to keep your scheduled appointment. This allows us to provide that time slot to another patient. If you No Show to your appointment or do not give the proper 24 hour notice, you will be charged a fee of \$30. Should you have more than two (2) instances, you are subject to immediate dismissal from our practice. We typically will do “reminder” calls prior to appointment times as well as send emails, however this is offered as a courtesy only and not a means to depend on to remind you of your appointment.

**After Hours and Emergencies:** For a serious emergency call 911 right away. If you are not sure and need to contact our office, please call our main number 352-629-5939 and follow the instructions to be transferred to the On-Call Nurse. You may need to leave a voicemail message but your message will be reviewed as soon as possible. Please note that we do not call in prescriptions after hours or process routine refills, schedule/cancel appointments, or any other non-urgent need. You will be directed to contact the office during normal business hours.

**Treatment of Minors:** Patients under the age of 18 must be accompanied by a parent or guardian.

**Lab Work:** As a convenience to you, we do have the ability to draw labs in our office, however due to tests that require special processing, there are times that you will be referred to the lab. Since we are not a lab and we do not run/process any lab tests we will send the specimens we collect to the lab that is contracted with your insurance. You must know what lab your insurance requires you to go to. Additionally, the lab we send your specimen to will run the tests that were ordered and will be billing your insurance. Please note that Symphony Healthcare, Inc. is not responsible for the invoicing to you or your insurance company for the lab work. Symphony Healthcare, Inc. is merely acting as a draw station, as a convenience to you. There is a nominal fee for this service.

**Labs Ordered by Other Physicians:** We do not draw lab work that was ordered by any other physician.

**Complete Physical Exams:** We believe that routine, annual complete physical exams with screening lab tests are very important to the maintenance of good health. However, insurance benefits vary; so again, please check your insurance benefits to verify these services and when you are eligible (typically one year and one day since your last physical exam.) There are times that we are not able to combine a physical exam AND a problem visit at the same time due to insurance billing restrictions. If you are sick or having a problem, we will gladly change your appointment to a sick/problem visit and reschedule your physical exam.

**Nurse Calls:** To speak with a nurse you can choose that option from the auto-attendant or be transferred by the receptionist. Often at the time you call the nurse is assisting another patient, so your call is answered by the voicemail. Please leave a detailed message-including your full name and a date of birth. The nurse will call you back-usually the same day.

**Prescriptions and Refills:** We will not prescribe new medications without an office visit. The best time to get a prescription refill is at your appointment. If you need to call for refills, don't wait until you have run out.

- Refills require the approval from the provider. Requests are typically processed within 24 hours. Any requests made after 12 noon might not be able to be processed until the next business day since the provider is typically with patients throughout the day.

- To request a refill by phone, you can choose that option from the auto-attendant or be transferred by the receptionist. Please be sure to leave a detailed message including your name, prescription name, strength, dosing instructions, pharmacy name, and phone number.
- Some medications have potential side effects that must be monitored. We require office visits every 3-6 months for these medications. Be sure to keep those follow-up appointments to avoid any potential delays on your refills.
- Some prescriptions cannot be called in. The prescription must be printed for you to pick up.
- Don't call after hours for prescription refills. There is no access to your chart and we may not be able to help you.

**Narcotics/Controlled Medications:** We do not prescribe narcotics. We also limit the use of other controlled medications to short-term use only. If you require use of narcotics or long-term/chronic controlled medications, we will happily refer you to a specialist that is appropriate for you. If at any time, you are prescribed a controlled medication, it is important for you to know:

- Controlled medications must be reviewed and approved by our Medical Director. Most controlled medications WILL NOT be given the same day as your appointment to allow time for our Medical Director to review your chart.
- You must disclose all medications you are currently taking from all sources to avoid any potential interactions.
- Medications must be taken as directed. You must not share, sell, or otherwise permit others to have access to your medications.
- Controlled medications MAY NOT be called in. You will be required to come to the office to pick up a prescription.
- Controlled medications are subject to be recorded by and monitored by The Florida Prescription Drug Monitoring Program, known as E-FORCSE®
- If at any time, Symphony Healthcare, Inc. believes there is any misuse of your medications, we reserve the right to refuse to refill any further medications, administer a drug test, and dismiss you from the practice, if necessary.
- A random urine drug screening may be required. Presence of abnormal results that would indicate a possible misuse, may result in the actions listed above.
- Refills will not be processed prior to when they are due. If your prescription is lost, stolen, or otherwise not available to you for whatever reason, your refill will not be processed until it is due, even with a police report.
- Controlled medications have a higher potential for addiction. We will monitor you closely. You will be required to comply with our practice policies whether written or at the providers discretion. You will be required to keep your scheduled office visits.

**Referrals:** It might be necessary at times to refer your care to a specialist or another provider. Our office will process the referral and send to the provider of your choice. It will be your responsibility to let us know what provider you have selected after you have verified with your insurance. Once we process the referral, you will be contacted by that specific office to schedule your appointment. We will not schedule appointments on your behalf. If you are requesting a referral that was not discussed at an office visit, you will be scheduled to be seen prior to processing this referral. Most insurance and specialist require a "face-to-face" examination prior to accepting a referral from our office. We will be happy to schedule you if this situation arises.

**Dismissal:** If you are "dismissed" from the practice it means you can no longer schedule appointments, get medication refills or consider us to be your provider. You have to find a doctor in another practice.

#### Common Reasons for Dismissal

- Failure to keep appointments, frequent no-shows
- Noncompliance, which means you won't follow provider instructions about an important health issue
- Abusive to staff
- Failure to pay your bill

#### Dismissal Process

We will send a letter to your last known address, via certified mail, notifying you that you are being dismissed. If you have a medical emergency or are sick within 30 days of the date on this letter, we will see you for these reasons only. After that, you must find another provider. We will forward a copy of your medical record to your new doctor after you sign a release form and payment for medical records is collected.

**No Insurance:** Symphony Healthcare, Inc. does accept self-pay patients. We have very affordable and attractive self-pay rates for office visits, lab tests, and other services. We do require payment upon check-in for each visit. If you are unable to pay at your visit, we will reschedule your appointment to a more convenient time for you.

**Insurance:** Although we are contracted with several insurance companies, it is your responsibility to make sure that our providers are in your plan. It is also your responsibility to know your insurance benefits. As a courtesy to our patients we will file primary insurance and most secondary insurances from our office. In order to do this we will require information from you. We will need all your demographic and insurance information prior to your appointment. We ask that at the time of your appointment you bring your insurance card and a photo ID as well as any other forms that will assist in making sure that your claim is filed correctly. At the time of service you will be responsible for all fees that are not

covered by your insurance, including co-pays,co-insurance, deductibles and non-covered services or items received. The co-pay cannot be waived by our practice, as it is a requirement placed on you by your insurance carrier. We strive to be as accurate as possible in calculating your responsibility but, with so many variations in policies and fee schedules, we are not always exact. You may receive a statement from our office for any balance due. For your convenience we accept cash, checks, credit cards (Visa, MasterCard, and Discover). Payments are also accepted by phone. If you receive payment from the insurance company, please forward the payment & all other papers received, to our office. Please do not send the payment back to the insurance company.

**Auto Accident/Liability Injury:** If your injury is a result of an auto accident, you are required to pay for services and then collect from the auto carrier. We will not file your insurance but will provide you with a receipt to do so.

**Worker's Compensation:** If your injury is due to an accident in your work place, please inform the receptionist immediately. We are not authorized to treat you for this type of claim. You will need to contact your supervisor for instructions on how to file a worker's compensation claim. We regret any inconvenience this may cause.

**Return Checks:** There will be a \$25 charge assessed for any check returned by your bank for any reason. Future checks will not be accepted.

**Disability, Insurance Forms, Attending Physician Statements, FMLA:** Due to information that is required in these forms, an office visit appointment is required. At times, it might be necessary to complete the forms after your appointment due to the amount of information required.

**Medical Records:** We will provide you a copy of your medical record upon written/signed request and for a fee that is allowable in the State of Florida. The fee schedule for medical records is a \$10.00 Research Fee and \$1.00 per page. You will be notified when your request has been processed, what the fee is, and when you're able to pick up those records. The fee is due when the records are picked up. As a courtesy, we will provide physician-to-physician medical records at no charge to you, if electronically transmitted to their office. Please allow 30 days to have your records processed.

**Results:** We will happily provide you with a copy of your laboratory, imaging, or other testing results from services in which we have ordered. We will not fax any results or medical records to you due to the sensitive nature of the material. We are able to email the requested documents to you if we have your signed authorization. Otherwise, please pick up these documents at our office.

**Billing:** If you receive a bill from us, it is because we believe the balance is your responsibility. Please contact your insurance company first, if you think there is a problem. If you have any questions about your bill, please call our billing department immediately. If you cannot pay your entire balance, please call to make payment arrangements.

**Third Party Billing:** If you receive a bill from a third party company, such as a laboratory, and you believe you were billed in error. Please contact the company that billed you directly and/or your insurance company. We do not handle any billing aspects from any company other than Symphony Healthcare, Inc. If you were told that you received a bill due to a coding issue, please forward a copy of the bill to our office so we can research further.

**Collections:** Accounts that are not paid within 30 days begin our in house collection process. If your balance becomes 65 days old, your provider will be notified and you may be subject to dismissal from the practice.