

Bray Family Medicine Clinic Policies

Thank you for choosing us! The providers & staff at Bray Family Medicine are committed to providing you with the best possible care. Our mission is to improve and deliver healthcare and overall well-being to the people of the community with superior patient service in a peaceful, warm environment. Your clear understanding of our policies is important to our professional relationship. For more information about Bray Family Medicine, visit www.brayfamilymed.com.

	Business Hours	Special Hours	Holidays
Monday	8 AM – 5 PM		New Year's Day
Tuesday	8 AM – 5 PM		Memorial Day
Wednesday	8 AM – 5 PM		Fourth of July
Thursday	8 AM – 5 PM		Labor Day
Friday	8 AM – 5 PM	Closed: 12 – 1 PM for staff meeting	Thanksgiving
			Christmas

Appointments: To schedule an appointment with a medical provider or counselor, call (870) 464-1515. We strive to stay on time, but due to unforeseen circumstances, an appointment may take longer than allotted. You will be informed of any delays. Please notify the front desk if you are still in the waiting room 30 minutes after your scheduled appointment time.

Cancellations / Missed Appointments: If you cannot keep an appointment, please call within 24 hours of your scheduled appointment time so that we can offer that time to another patient in need of care. If you do not cancel within 24 hours of your appointment time, you will be charged a no-show fee of \$30. This fee must be paid in full before your next office visit. Bray Family Medicine may choose not to see those who repeatedly miss appointments or cancel appointments without sufficient notice. Being hospitalized or providing an explanation regarding an emergent event or circumstance beyond your control will not be considered a no-show.

Refill Requests: To request a prescription refill, please contact your pharmacy directly. If you have no refills remaining, your pharmacy will send a refill request electronically allowing us to respond quickly. Refill requests are processed during regular business hours usually on the same day we receive the request. If your refill is not ready within 48 hours, call us at (870) 464 – 1515. Please check your medications before all vacations, holidays and weekends to ensure you have an ample supply during these times.

Contact Your Care Team: If the situation requires urgent attention, call us at (870) 464 – 1515 and relate the urgency to our operator. **In an emergency, dial 9-1-1.** Non-urgent questions and requests can be made by:

- texting us at (870) 466 – 4624,
- sending a secure message through the **Patient Portal**,
- emailing us at caremanager@brayfamilymed.com or
- calling us at (870) 464 – 1515 and leaving a voicemail including your full name, date of birth and detailed message.

Urgent After-Hours Care: A member of your care team can be reached after-hours by calling (870) 464 – 1515. Follow the prompts so that the on-call provider and staff will receive your message and can access important medical information. If you experience a critical situation, go immediately to the emergency department of the hospital nearest you or call 9-1-1 for assistance.

Paperwork: Any paperwork for medical equipment, diabetic supplies or handicap parking, FMLA requests or other work-related forms, physical forms, or a request for a written letter from your provider ideally should be discussed & completed during an office visit. Please schedule an appointment and bring all forms and related information. If it is determined after a visit that paperwork is needed, you must provide the appropriate forms and complete a paperwork questionnaire that includes the information necessary to meet your request. Our fee for completing paperwork will depend on the time requirement, and payment is due before your provider can begin filling out the paperwork. Please allow your provider at least two weeks for completion.

Financial Policy

Insurance Claims: We charge what is usual and customary for our area. As a courtesy to you, our patient, we accept most insurance plans and submit claims to these plans on your behalf. It is important that we have accurate and complete information on your insurance coverage. We will not become involved in disputes between you and your insurance company regarding deductibles, copays, covered charges, secondary insurance, etc. other than to provide factual information as necessary. Insurance coverage is a contract between you and your insurance company. We are not a party to that contract, but in order to be a participating provider and file claims for services rendered, we are required to enter into a contractual agreement with each insurance company and ensure that all your insurance plan's requirements are met prior to providing services. It is your responsibility to pay for all services not covered or denied by insurance. We are happy to provide any services you need, but if your insurance plan does not cover certain services, you will be required to pay for the non-covered services. If your insurance plan denies rendered services, in full or part, we will bill the balance to you. Payment of copays, deductibles, and non-covered services is expected at the time of service. Patients without insurance are expected to make payment prior to service. Bray Family Medicine accepts cash, checks, credit cards and health savings accounts. Checks returned for non-sufficient funds will be charged \$25.

High Deductible Plans: One of the biggest challenges in healthcare is developing innovative and truly effective methods to help patients live healthier lives at a time when all Americans are struggling to afford ever-increasing health insurance premiums for plans with often such high deductibles that won't ever come close to being met unless catastrophe strikes. A large percentage of Americans are paying a high price for catastrophic coverage but having to forego chronic disease management visits, lab monitoring, and medications refills due to high drug costs, unmet deductibles, and the fear of what these services may cost. Inadequately managing chronic diseases, in turn, greatly increases the risk of a catastrophic event. At Bray Family Medicine, we believe in price transparency. A clear understanding of the costs of your care will enable you to make informed decisions about how your healthcare dollars are spent.

Unmet Deductibles: If you want our services filed as a claim and go towards your deductible, we are required to charge you the allowable rate set by your insurance company. There is such a wide variation in rates among the numerous plans offered by all the different insurance companies that it is impossible to obtain an accurate estimate before services are rendered. If your plan has a deductible that has not yet been met, you are required to pay \$75 when you check-in for your visit (excludes behavioral health visit). This payment will be applied towards your deductible. You will receive a bill for the remaining balance which is dependent upon your insurance allowable rates.

Sliding Scale Fee Discount Program: This program is designed to provide free or discounted medical care to those who have no means, or limited means, to pay for visits with a medical provider (uninsured or underinsured). All patients seeking medical services at Bray Family Medicine are assured that they will be served regardless of ability to pay. No one is refused service because of lack of financial means to pay. Applications are available at the front desk.

Discounted Direct Care Rates: Those with high-deductible insurance plans which are unlikely to be met in the calendar year may decide it's best NOT to file an insurance claim for services rendered and elect instead to take advantage of our discounted direct care rates. For uninsured patients or patients who direct us NOT to file an insurance claim, our discounted direct care rate for an in-person office visit is \$75 regardless of complexity or type of visit (excludes behavioral health visit). Our discounted direct care rate for a telemedicine video is \$40. Payment in full must be received at the time of service. If lab, procedures, or any other services are indicated, the exact amount of each additional service will be provided for your approval before the service is rendered. A detailed list of all of our discounted direct care rates is available upon request.

Accidents: In the event you are involved in a motor vehicle accident or work-related injury, you are expected to pay for services when rendered. We will gladly provide you with all the necessary paperwork to file your claim with your car insurance or employer.

Payment Plan: We understand that medical bills are often an unplanned expense and can be hard to pay. If your account balance is more than \$200, you may request a payment plan.

Nonpayment: We require timely payment of your bill. All copays, deductibles, and coinsurance amounts are due at check-in before you see your provider. If there is a balance due after your insurance has paid, you will receive adequate notifications via email, regular mail or by telephone call. If the balance remains unpaid after three statements have been sent, we will refer your account to a collection agency.

Acceptance & Authorization

- I hereby acknowledge receipt and acceptance of the Bray Family Medicine Clinic Policies.
- I acknowledge that providing my mobile number as a method of contact authorizes Bray Family Medicine to contact me by text message.
- I authorize Bray Family Medicine to obtain/have access to my medical history including my medication history.
- If I choose to participate in a telemedicine visit with my healthcare provider or counselor via telephone or video:
 - I acknowledge that such visit will not be the same as an in-person visit due to the fact that I will not be in the same room as my provider/counselor;
 - I understand there are potential risks to this technology, including interruptions, unauthorized access and technical difficulties;
 - I understand that my healthcare provider/counselor or I can discontinue the telemedicine visit if it is felt that the telephone or video connection is not adequate for the situation.

Signature of Patient or Legal Representative

Date