

POLICIES AND PROCEDURES

1. **BILLING:** We would like to take this opportunity to explain the way your visit to UT Rheumatology will be billed to your insurance company. We are an outpatient department of UT Medical Center. As an outpatient department, you will receive a facility charge from the hospital. We are not billed like a visit to your regular doctor/specialist office. This method of billing is customary with hospital-based clinics and other areas here at the hospital. You will also receive a charge from your physician for the office visit. You may receive a bill from Lab Corp for any lab testing completed. If you have any questions regarding your bill, please call: 865-251-4400 for UT Medical Center billing and/or 865-670-6199 for physician office billing.
2. **COPAYMENTS, COINSURANCES, OR DEDUCTIBLES:** Co-payments will be collected at time of service. All of these payments are expected to be paid in full on the date of service as required by your insurance company.
3. **ARRIVALS:** **Return patients who arrive after their scheduled appointment time may be asked to reschedule.** Return patients may be given the option to wait for another appointment time on the same day if one is available. New patients are expected to **arrive 30 minutes prior to scheduled appointment time** bringing with them their completed paperwork, their insurance card, and a photo ID. New patients may be asked to reschedule if the arrival time is later than the appointment time or if new patient paperwork is not completed upon arrival.
4. **NO SHOW APPOINTMENTS: CANCELLATIONS AND RESCHEDULES:** We require at least **24 hour** notice if you will be unable to keep your appointment. If you do not show for any appointment three times without calling to cancel or reschedule your appointment, you may be dismissed from the practice. A new patient who fails to show for their new patient appointment may be dismissed from the practice as well.
5. **APPOINTMENTS:** Once care has been established with a provider within our office, our office policy prohibits patients from switching to a different provider in the same office.
6. **PARKING:** Parking can be challenging on the UT medical center campus, and we encourage you to allot ample time for parking. Our office does not offer parking vouchers. Standard parking rates are \$3.00 and valet parking is \$5.00.
7. **NON-INSURED PATIENTS:** Our patients will need to be prepared to pay the balance in full at check out. A discount of 60% will be given to self-pay patients paying at the time of service. All other self-pay patients will need to call our Billing Office at 865-670-6199 to make payment arrangements.
8. **REFERRALS:** If your insurance requires a referral or authorization from your PCP to see our providers, it is important that you obtain this before coming to your appointment. The referrals and authorizations may be faxed to our office at 865-305-2694.
9. **NON-COVERED SERVICES:** Please be aware that some of the services you receive may not be covered or not considered reasonable or necessary by your insurance, even though your physician may feel that it is necessary. Our office will file each visit with your insurance company. If they deem that something is not reasonable or necessary, you will be responsible for this cost.
10. **PROOF OF INSURANCE:** All patients must complete our patient information form before seeing our physician. We will ask that you complete this form once every year. We will need copies of your current insurance and pharmacy cards to provide proof of coverage. If you fail to provide us with the correct information in a timely manner, you will be responsible for the balance of the claim. If your insurance changes, please notify us immediately so we can make the changes to allow you to receive maximum benefits from your policy. We will need a copy of your new insurance card at your next visit. We will need a copy of your new insurance card prior to refilling any medications. Your pharmacy card will allow you to receive full benefits in the event a specialty drug is prescribed.

PLEASE SEE OTHER SIDE FOR MORE INFORMATION → → →

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11. **CLAIM SUBMISSION:** We will submit your claims and assist you in any way reasonably possible to get your claims paid. Your insurance company may need you to supply certain information directly. It is your responsibility to comply with their requests. Please be aware that the balance of your claim is your responsibility whether or not your insurance company pays your claim. Your insurance policy is a contract between you and your insurance company. If your insurance company does not pay your claim in 45 days after being filed. The balance will automatically be billed to you. If you have Medicare, we will bill any monies owed after we have received payment from Medicare and/or secondary policy that you might have.
12. **NON-PAYMENT:** If your account is over 90 days past due, you will receive a letter from our billing department. Please be aware that if a balance remains unpaid, we will refer your account to a collection agency, and you may be dismissed from our practice.
13. **HIPAA:** A copy of the UPA Notice of Information Practice has been made available to me. I understand that this notice describes how my health information may be used or disclosed by UPA, physicians and other providers practicing at UPA facilities and I that I should read it carefully. I am aware that the notice may be changed at any time. I may obtain a revised copy of the notice by calling 865-305-5743, by visiting www.utmedicalcenter.org or by requesting one from the UPA office.
14. **MEDICAL RECORDS AND COMPLETING FORMS:** Medical records will be sent to any physician upon completion of a medical release form. Attorneys requesting medical records are charged \$20 for the first 40 pages, and 25 cents per page after 40. Please be advised that all forms will be completed for a charge of \$25 which is due upon receiving forms. Please allow 7-10 business days for any forms and medical records request to be completed.
15. **ROUTINE PRESCRIPTION REFILLS:** The safest and most effective way to obtain prescription refills is to call your pharmacy and ask them to fax a request to our office. Your pharmacy has an electronic record of your prescription history with the correct dosage and spelling of your medication. By your pharmacy sending the request, it ensures that we get the correct information and expedites our ability to approve your refill. Please allow 72 hours for refills to be processed. In addition, please request your refills a few days prior to being out of your medication.
16. **TEST RESULTS:** You are encouraged to join the IQHealth portal to see all results and communicate with our office. Please check with the front desk for instruction on joining this great communication tool. Occasionally, a test will be sent out to any outside laboratory and will take longer to receive those results. Please do not call the office regarding test results until 10 days after the test was performed. Please understand when calling our nurse line for any reason after 3:00 PM, your call will not be returned until the next business day that your provider is in the office. Calling and leaving multiple messages **will not expedite your request.** In fact, it may delay the response time, depending on the reason for the call.

I have read and understand the financial policies along with the prescription refill and test result policies.

Patient Signature: _____ Date: _____

A copy of this document can be provided to you upon request.