



Putnam North Family Medical Center
An Affiliate of Advance Pain Management of Oklahoma



PATIENT INFORMATION

AND

PRACTICE POLICIES

The Putnam North Family Medical Center's commitment to maintaining a broad knowledge and skill base enables your family to benefit from comprehensive and convenient health care. This comfortable and cost-efficient approach also allows us to get to know each of you as an individual and enables us to provide you with the personal compassion you deserve. We genuinely care about you, and your well being is our highest priority.

To help us serve you more efficiently, please take a moment to familiarize yourself with the following Patient Information and Practice Policies.

Patient Information

Upon arrive for each visit; we require that you complete our mini sign- in sheet in its entirety. This form has been designed to help us keep your demographic information up to date and requires minimal time and effort. If changes have been made to your demographics, you may be asked to complete our standard demographic form. Please understand that up to date information is vital to our claims process and enables us to serve you efficiently.

Appointments

We make every effort to accommodate your needs when scheduling your appointments. Please call our office at (405) 722-9474. Our call center is open from 7:00am to 4:00pm, Monday through Friday

We require at least a 24 hour notice if you will be unable to make your scheduled appointment time. If less than a 24 hour notice is given, the standard no-show/late cancellation fee will be assessed as follows:

- \$100.00 - routine office visit
- \$200.00 – complete physical
- \$125.00 – Psychotherapy services



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If you will be arriving more than 10 minutes late, this will be considered a “no show” and subject to the charges listed above and you will be asked to reschedule your appointment. Please notify our office immediately so that arrangements can be made.

Always arrive at least 15 minutes early for your appointment. This allows time for you to fill out any paperwork necessary for the visit and for us to make any changes necessary to your account. If you are not able to complete your forms within 10 minutes of your appointment time, it may be necessary to reschedule your appointment. If your appointment is rescheduled, you will be responsible for the charges listed above.

All of our fees are due at the time services are rendered unless prior arrangements have been made through our patient representative.

Questionnaires

Questionnaires are often required by our providers to be completed prior to your office visit. The questionnaires required are determined by your age, sex, your medical condition(s) and/or the reason for your visit. Thorough completion of these questionnaires enables your medical provider to accurately and efficiently treat your medical conditions. Although they may seem redundant, please be assured that the information received from the data is vital to your healthcare. Upon request, we are happy to supply you with the questionnaires that will be required for your next office visit. In addition, completion of these forms prior to your visit will shorten your wait time.

Lab/Test Results

Your medical provider’s support staff will notify you of your test results by telephone or by letter. Various tests take different amounts of time to complete. At the time your test is obtained, you may ask the staff when to expect notification of results. If you have not received notification of your lab results within 7 days, please contact our laboratory staff at 405-722-9463 x 103.

Phone Calls/Medication Refills

We make every effort to return all phone calls within 24 hours. Calls may be returned by physician support personnel. If you have an emergency, please dial 911 immediately.

Medication refills will only be approved if you are following the treatment and follow up plan recommended by your medical provider. We write prescriptions for the appropriate quantities and provide enough refills to last until your next appointment. Therefore, it is imperative that you schedule your follow up visit during your appointment to ensure that you have enough medications/refills to last until your next appointment.



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If you do require medication refills, please call your pharmacy and have them fax over your refill request. Our fax number is (405) 722-9463. Please check with your pharmacy after 24 hours to verify that your refill request was approved.

If your request is for a controlled (class II) medication, a signed paper prescription is required by Oklahoma law and must therefore be picked at our office. All class II prescriptions will be stamped with our official seal to help prevent fraudulent prescriptions. Please be sure that the prescription is stamped with our official seal prior to leaving the office.

Fees

Our fees are based in national industry standards and most are set by your insurance company. Some of the factors that influence the cost of care are time, complexity of visit, cost of materials and supplies, and cost of technology. We make every effort to keep our fees as reasonable as possible.

Co-Payment & Deductibles

It is our contractual agreement with the insurance companies and our office policy to collect co-pays and deductible owed by the patient at the time of service. It is the patient's responsibility to understand their insurance coverage and limitations. If you are unsure of your plan limitations and/or benefits, please contact your insurance company or plan administrator for guidance. The telephone number is listed on your insurance card.

All co-pays, deductibles and past due balances will be collected upon arrival and prior to your office visit. For your convenience, we accept checks, cash, MasterCard, Visa, American Express, and Discover Card.

Wellness Exams / Routine Visits

Wellness exams are a vital in maintaining good health. We recommend annual wellness physicals for all of our patients regardless of age. As a service to our patients, we offer appointments that combine wellness physicals and routine follow up care in a single visit. We respect your time and offer these combined visits as a service to you. Please be aware that your insurance company may charge a co-pay for these combined services and the visit may not be completely covered under your wellness benefits. If you do not wish to have your current medical conditions evaluated or treated during your wellness exam, please notify your medical assistant upon arrival. Please note that if a new condition is discovered during a wellness exam and if evaluation is needed to address the condition and/or medication is needed to treat the condition, an office visit in addition to your wellness visit will be charged.

Claim Filing

We utilize the professional services of Medical Billing Associates Billing Service. To ensure that your claims are forwarded correctly, please provide us with a current copy of your insurance



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card (s). In addition, please notify us promptly of any changes in your coverage. You may fax this information to our office at 405-722-9463. After your insurance carriers have responded, the balance will be billed to you and payable upon receipt of statement.

If you need assistance with an insurance claim, Medical Billing Associates is happy to assist you. Please phone 800-933-1895 for assistance.

How You Can Help

Insurance companies normally process claims within 30 days. If you have not received an explanation of benefits (EOB) from your insurance company within this time frame, please contact your plan administrator for assistance. We will be happy to assist you with any information you may need.

Participation

Our office participates in numerous PPO and commercial insurance plans. Please contact your particular insurance company to verify that our providers are listed with your plan

Choosing a Primary Care Physician (PCP)

Some insurance plans require you to choose a primary care physician. Please check with your insurance plan representative to verify your policy requirements. All of our providers are contracted with the major employer groups in this area. Our patient representative will be glad to assist you with any questions you have in choosing your primary care physician.

Referrals to Medical Specialists

If you wish to see a Medical Specialist, your insurance plan may require a referral from your primary care physician. Please verify this with your plan administrator or call our triage nurse with any questions you may have.

If one of our medical providers recommends that you see another medical specialist or recommends that you have additional testing performed at another facility, you will be contacted by our referral nurse. If you have not been notified within 3 days, please contact our referral nurse at 405-722-9474 x 131.

Financial Waiver

You may be asked to sign a waiver stating that you agree to pay for expenses that may not be covered by your insurance. Your physician will discuss your health care needs with you and allow you to make an informed choice before providing any of these services.

Payment Arrangements

Our Patient Liaison is available to arrange plans for convenient payments if needed. She can provide you with information on various programs and options that may offer assistance. To



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Speak with our Patient Liaison, please call (405) 773-5917. For your convenience, we accept Visa, MasterCard, Discover, American Express, personal checks, cash and post-dated checks.

Personal Injury/Auto Accidents

We ask that on your first visit for these types of services, you supply us with all the information needed to file a claim to the responsible party. Without this information, you will be asked to pay for your services at the time they are rendered. If you have legal representation, please provide us with their name, address and phone number. It is our policy to file physician liens against any balance over \$200.00 and a \$50.00 lien processing fee will be applied to the account.

Patient/Guardian

Date