



OB/GYN Women Specialists of Georgia, P.C.

"Women Dedicated to Women's Health Care"

Vintonné A. Naiden, MD, F.A.C.O.G.

OFFICE POLICIES

Welcome to OB/GYN Women Specialists of Georgia, P.C. Our goal is to provide you with the best quality care throughout every phase of your life. The office policies below are designed to make sure your office experience is a great one from beginning to end!

CO-PAYS

1. All co pays and coinsurances are due at the time services are rendered. It is important for you to know your co pay/coinsurance amount prior to your appointment. You may obtain this information by calling the office or by calling your insurance company.
2. Per your insurance company, you are required to pay a co-pay every time you come in for an appointment. This includes: consultations, follow up appointments to discuss test results, ultrasounds, in-office procedures, and problem visits.
3. Your insurance company may not require you to pay a co pay for your annual exam visit. Please be aware that if you are coming to the office for your annual exam and complain of any problems in addition to your annual exam, (e.g. abnormal bleeding, infertility, pelvic pain, vaginal discharge, etc.), you may be responsible for paying a co-pay. If we do not collect a co pay at the time of your appointment and you are responsible for a co-pay, per your insurance company, you will be billed for the amount of the co-pay.

APPOINTMENTS

1. When you check in at the front desk for your appointment, please make sure you verify that we have all of your updated information, including your current address, telephone numbers, insurance information, etc.
2. We appreciate every effort that you make to keep your appointment and we do understand that things may come up that will cause you to have to cancel or reschedule your appointment. In the event that you need to cancel or reschedule your appointment please give us a 24 hour notice. Giving a 24 hour notice allows us to adjust our patient schedule accordingly. There will be a \$25 "no show" fee for patients who do not give a 24 hour cancellation and fail to show up for their appointment.
3. **New Patients & Annuals.** If you are a new patient or if you are coming in for your annual exam please make sure you complete your health history online at least 24 hours prior to your appointment. You will be given a username and password which will allow you to log onto our patient portal where you can update your health records. If you are not given a username and password at the time your appointment is scheduled please call the office to retrieve this information. If you do not have an *email* address you can have the forms faxed to you. If we do not receive your forms at least 24 hours prior to your appointment

please arrive 30 minutes early. If you complete your forms prior to your appointment we will need for you to arrive 15 minutes early.

4. We understand that, on occasions, there will be situations that will cause you to be late. Please call the office if you are going to be more than 15 minutes late to make sure the provider will be able to see you in a timely manner.
5. The provider makes every effort to be on time. Unfortunately, emergencies, or unforeseen situations may delay your appointment. The staff will make every effort to notify patients prior to their appointment time if the provider is running behind schedule.

LAB RESULTS

1. We ask that every patient bring in a self-addressed, stamped envelope whenever they have lab work done. If you are unable to bring your own envelope we will be more than happy to provide you with one for a cost of \$0.75.
2. Patients are required to schedule a follow up appointment to discuss lab results that are not normal. If your labs are not normal you will receive a letter in the mail stating that your results are not normal and you need to call the office to schedule an appointment to discuss your results. Due to HIPPA regulations, we are not allowed to mail any test results that are not normal. All lab results that are not normal must be discussed in person.

TELEPHONE CALLS

1. In order for the provider to give you his/her complete attention during your office visit, the staff is instructed not to interrupt the provider for telephone calls, unless it's an emergency. Patients calling to schedule appointments, to inquire about services, to check the status of lab results, to inquire about a bill, and/or for prescription request will be handled by the staff.
2. If a patient calls the office regarding a medical problem that cannot be handled by the staff, the staff will offer an office appointment. However, if the patient requests to speak to the provider to discuss any medical related problems and prefers not to come in for an appointment, the patient will be asked to schedule a phone consultation. There is a \$50 fee for all phone consultations. **Please keep in mind that your insurance company may not cover phone consultations. Please check with your insurance company to find out whether or not this service is covered under your plan.**

PRESCRIPTION REFILLS

1. It is very important to remember to get all of your prescriptions refilled during your scheduled appointment time, whenever possible.
2. Please allow 24-48 hours for prescription refill requests to be called in to your pharmacy

MEDICAL RECORDS/FMLA/DISABILITY FORMS

1. There is a \$25 fee for medical records requested by a patient. There will not be a charge to the patient for medical records requested by another physician's office, or hospital. Please allow 7-14 business days for your medical records to be mailed. There is a \$20 fee for FMLA & disability forms to be completed by the provider. Please allow 7 business days for the forms to be completed.

BILLING POLICIES

1. We accept most insurance plans and will bill all insurance plans that we participate with. We request that co-pays are paid at the time services are rendered as required by your health plan. We request payment in full from all patients that do not have medical insurance and patients that are not enrolled in one of the plans that our office participates in. We understand that some patients may have a high deductible or high coinsurance percentage and may not be able to cover their entire patient balance at once. We offer payment plans on an individual basis. To discuss payment plan options please ask to speak to someone in our billing department.
2. Any service provided by our office that is not covered by the patient's insurance is the patient's responsibility. Patients will be informed of the cost of these services before they are rendered.
3. To make sure your medical bill(s) is/are processed in a timely manner, please inform the office of any plan and/or benefit changes.

PATIENT BALANCES

1. Patient statements are mailed on the 1st and the 15th of every month. If you have an outstanding balance you may pay your balance in person, over the phone, or by mailing a check to the office.
2. If you are scheduled for an appointment and you have an outstanding balance please be prepared to pay on your balance and/or make payment arrangements at the time of your appointment.

I, _____, have read and understand the office policies.

(Patient Signature)

(Date)