

Kara Wallace, M.D, PC

4650 Whitesburg Drive, Suite 204, Huntsville, AL 35802

(256)533-5211 Fax: (256) 533-5084

Family Practice

Office Information and Policies

We are dedicated to providing the best possible care for you, and want you to be aware and understand our office policies. We hope that these efforts will make your visits to our office more efficient and less stressful for you.

1.) **Insurance:** Not all insurance plans cover all services. In the event your insurance plan determines a service "not covered", you will be responsible for the complete charge. Health plan coverage varies significantly by carrier, by employer, and/or by contract. It is the patient's responsibility to know and understand their plan's coverage and benefits. All questions regarding your policy should be directed to your insurance carrier.

Standard fees not covered by insurance:

1. Medical Forms \$25 - \$75+
2. Letters \$25+
3. Missed Standard Appointment (with no cancellation call) \$35 (As a **courtesy** to our patients we will remind you of your scheduled appointment through your patient portal.)
4. Missed Physical, Post-Hospital, Home Health Assessments or Appointments requiring multiple medication refills (not cancelled within 24 hrs of appointment time) \$75

2.) **Co-payments & Deductibles:** All co-payments are due prior to service. No exceptions. If you have a deductible, which has not been met, this must be paid at time of service. There will be a \$30 charge on all returned checks. Future visits must be paid with cash or credit card. All self-pay visits must be paid at the end of your visit.

3.) **Proof of Insurance:** All patients must complete our patient information form before seeing the doctor or practitioner. All patients will need to bring their driver's license or photo ID and a current valid insurance card. If you fail to provide us with the correct insurance information in a timely manner, you will be expected to pay in full.

4.) Prescriptions:

1. For your safety, all medications taken on a regular basis for a chronic illness require regular follow-up visits before they can be refilled. Patients are usually required to be seen every 3 - 6 months depending on diagnosis. Please contact our office 2-3 weeks prior to taking your last dose to ensure an appointment is available and there is no lapse in your medication.

2. For prescriptions not filled during an office appointment or for mail order pharmacies, you will be subject to a \$10 fee per medication.

This does not mean prescriptions will be called in without proper evaluation.

3. Prescription requests require 2 business days (not including weekends or holidays).

4. **NO NARCOTICS, CONTROLLED SUBSTANCES OR SLEEPING MEDICATIONS WILL BE CALLED IN OVER THE PHONE.** These medications can only be written by Dr. Wallace, please contact our office 2-3 weeks prior to taking your last dose to ensure an appointment is available and there is no lapse in your medication.

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- 5. Prescriptions requiring Prior Authorization by Your Insurance Carrier will be subject to a \$25 administration fee. Prior Authorization does not guarantee coverage by your insurance carrier.
- 6. We do not mail prescriptions as this presents a liability.

5.) **Test Results:** Please allow 7-10 days for test results. We will contact you by phone or through your patient portal.

6.) **Referrals:** We do not refer out for problems that have not been evaluated in our office. All referrals requiring written or electronic authorization from Your Insurance Carrier will require an office visit for proper evaluation.

7.) **Office hours & services:** Open Monday-Friday during regular business hours by appointment only. We do not provide care for Worker's Compensation or Chronic Pain Management with controlled substances. We provide after hours on-call services for urgent medical problems only.

8.) **Records:** Copies of your medical records are available to you with a signed medical release. Copying and postage fees may apply.

Patient Name: _____
Please Print

Patient Signature: _____ Date: _____