

ISLAND WOMEN'S CARE, LLC
38 BLACKGUM RD SUITE D
PAWLEYS ISLAND, SC 29585

Christine S. Gerber, MD, FACOG
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PH: 843-235-1222
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OFFICE POLICIES & PROCEDURES FOR OUR PATIENTS

Thank you for choosing Island Women's Care, LLC. We realize that you have a choice in medical providers and are pleased that you have chosen to seek care with us. The staff at Island Women's Care, LLC strives to exceed expectations in care and service in order to make your experience with us as comfortable and stress-free as possible. Our goal is to provide quality medical care in a timely manner. In order to do so, we have implemented the following policies. These policies enable us to better utilize available appointments for our patients in need of medical care. Please feel free to contact our office if you have any questions regarding any of the following policies.

OFFICE HOURS:

Our office is available Monday - Thursday 8:30am to 4:30pm and Fridays from 8:30am to 12pm, and may be reached at 843-235-1222. If you need an appointment, prescription refill or test results, please call during regular business hours. There may be circumstances beyond our control that force us to close the office during normal business hours. We will make every attempt to notify you of any such closure including telephone, email, website and other social media.

APPOINTMENTS:

Island Women's Care, LLC is committed to providing quality care to our patients. To ensure timely continued care, we encourage patients to schedule appointments in advance of follow-up due dates. When calling for an appointment, please provide your name, date of birth, telephone number, chief complaint/reason for visit, as well as any updated contact or insurance information. While we strive to schedule appointments appropriately, emergencies can and do occur. For this reason, we kindly request your patience and understanding should an emergency arise and affect your appointment. To ensure quality care, Island Women's Care, LLC DOES NOT treat patients, via calling in prescriptions, that we have NOT seen. Follow up may be required to be scheduled after a test or procedure is performed. We encourage you to schedule appointments ahead of time for prescription, contraceptive and annual exams. All patients are expected to keep their scheduled appointments for treatment.

CANCELLATION POLICY:

Island Women's Care, LLC requires a 24 business hour notice of cancellation if you are unable to keep your appointment. We are more likely to reallocate the time for another patient that is in need if we have this notice so we can serve needs in a timely fashion. You will be charged a NO SHOW FEE of \$35.00 (or \$50 if a scheduled procedure/ultrasound) if a 24 hour notice of cancellation is not given to us. All calls and emails are recorded and date and time stamped. In addition to charges, more than three (3) cancellations or reschedules by patient within any six (6) month period may result in discharge from the practice for failure to adhere to the physician plan of care. We cannot care for you if you do not come to your appointments.

NO SHOW POLICY:

A "No Show" is missing an appointment without at least a 24 business hour notice to the provider's office. All calls and emails are recorded and date and time stamped. We require at least a 24 business hour notice of cancellation so that we have time to offer open appointments to other patients in need of an appointment. No Show appointments will be charged \$35.00 and NO Show scheduled procedures/ultrasounds will be charged \$50.00. In addition to the charge to the patient, more than three (3) "No Shows" within any given six (6) month period may result in discharge from the practice for failure to adhere to the physician plan of care. We cannot care for you if you do not come to your appointments.

UPDATED: 10/01/2020

INSURANCE:

Island Women's Care, LLC will bill your insurance according to our contracts with the insurance companies. It is your responsibility to give us the correct insurance information to bill your claims. We do not participate with Medicaid and will not bill either primary or secondary Medicaid claims. Insurance contracts mandate that we collect copays, coinsurances, and deductibles from patients. If you are in disagreement with what your insurance company is telling us to collect from you, please contact your insurance company. Please know your insurance benefits and notify our office of any insurance changes. We collect all copays for annual exam appointments. If your deductible has not been met and are being seen for a follow up, problem or procedure, we will collect the allowable office visit charge. If there is a patient refund due according to the insurance adjudication, refunds are processed no later than 30 days after the date of insurance posting as long as there are no other claims or other balances pending payment. We will bill a claim no more than 2 times regardless of reason of denial. Ultimately you are responsible for any balances unpaid after 60 days regardless of insurance billed or reason denied.

PAYMENTS:

Island Women's Care, LLC accepts cash, personal checks, MasterCard, Discover and Visa. Checks can be made payable to: Island Women's Care, LLC. It is the policy of Island Women's Care, LLC to make all reasonable attempts to collect outstanding balances including at least 3 statements, phone calls and collection letter. We offer installment agreements with a credit/debit card on file. Any breach of signed installment agreement will result in immediate discharge from the practice and/or immediate submission of account to third party collection agency. Any accounts over 90 days may be outsourced to a third party for collections and may result in discharge from the practice for failure to adhere to financial policy. All return checks will be notified by certified mail, are subject to a \$30.00 return check charge, and given ten days to resolve. All returned checks and fees will be turned over to the magistrate's office after 10 days.

FORMS/LETTERS:

We understand that you may need forms or letters to assist you with your healthcare needs. We are happy to entertain all requests for forms or letters; however, these can be time consuming and we do require at least 72 hours up to 7 days to complete and payment of \$25.00 fee before we can release. All completion of forms and letters are at the discretion of the physician and are not guaranteed to be accepted as medically necessary.

MEDICAL RECORDS:

Per HIPAA guidelines, copies of medical records must be requested in writing. To ensure your privacy, a form for release of information must be completed prior to receipt of these materials. All patients can request a copy of their medical records. Any requests from an outside party for patient records must be approved in writing and signed by the patient or power of attorney for the patient. All medical record requests will be billed and released within 30 days in accordance with SC Medical Records Law and must be paid prior to release of records.

PRESCRIPTION REFILLS:

Island Women's Care, LLC encourages patients to request refills during scheduled appointments. If you are requesting a prescription or a refill outside of your appointment, there will be a \$25.00 charge per prescription. All controlled substances require approval from physician, a signed controlled substance policy by the patient, and must be picked up at our office if not addressed during your appointment. There is a \$25.00 fee for any controlled substance prescribed outside of your appointment date/time and we are mandated by the State to check the SC STATE REGISTRY and chart results each time we prescribe a controlled substance. Please allow up to 72 hours to complete your request.

If you would like a copy of our Notice of Privacy Practices, please go on our website islandwomenscare.com.

UPDATED 10/01/2020

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INSURANCE COVERAGE / PAYMENT POLICY

Prior to your appointment, we will verify your insurance and benefits. Please be prepared to pay any copays, coinsurance, and/or deductibles that have not been met. We DO collect copays, if applicable, at every visit regardless of reason. If your claim is paid in full by your insurance carrier, then you will be refunded within 30 days of insurance adjudication of claim. We want your visit to be as comfortable as possible and all financial matters understood PRIOR to your visit so that your care is the priority at your visit. IF you are unsure about your insurance plan or benefits, please contact your plan or Plan Administrator.

DEDUCTIBLE:

A set amount that you must meet before your insurance plan contributes to any expenses.

OUT-OF-POCKET (CO-INSURANCE)

A set amount that you must meet via a percentage of each visit or allowable before the insurance plan contributes 100%.

EX: \$5500 out of pocket at 30% (Meaning you must pay 30% of all expenses until that totals \$5500 before your plan will pay 100% of claim)

COPAY:

A set amount that you must pay each time you visit a provider, lab or other healthcare provide. Ex: \$30.00 for primary care visit, \$50.00 for specialty visit, \$50.00 for ER visit.

Your insurance may or may not cover your visit with ISLAND WOMEN'S CARE, LLC. We collect all copays, coinsurances, and deductibles when you check in prior to seeing your physician as we do not know what will be addressed and documented by the physician during your encounter. Annual gynecological exams include preventative services only. Anything other than preventative services addressed during your encounter will be coded in place of, or in addition to, your annual exam.

In lieu of a credit card on file, we request that you pay in advance for estimated charges for services scheduled.

BC/BS State Health Plan nor Medicare Part B cover annual gynecological exams.

We make every reasonable attempt to collect from insurance but ultimately the patient is responsible for all balances regardless of reason of insurance denial.

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MEDICARE ANNUAL WELLNESS VISITS:

AUGUST 01, 2018

Dear Medicare Patient:

Medicare began paying for special Annual Wellness Visits on January 1, 2011. These services are intended to help you develop a plan for addressing ongoing medical problems. In general, these services should be performed by your primary care provider. The services you normally receive in OUR office are not included in the Annual Wellness Visit. Specifically, the new Annual Wellness Visit DOES NOT INCLUDE pelvic and breast examinations or the collection of PAP smears. The Medicare Annual Wellness visit is geared to address your ongoing general medical needs and not specific gynecologic problems or concerns.

The Medicare Annual Wellness Visit should be available through your primary care provider.

As always, we are happy to see you for any gynecologic screenings and problems you may have, including the ongoing management of menopausal symptoms, bladder problems, and issues with pelvic pain, prolapse, osteoporosis, breast concerns, or other gynecological related conditions. Your normal deductible and co-insurance will apply to these problem-oriented services. Medicare only covers every two (2) years for breast/pelvic exam and pap smear unless you have underlying issues such as breast cancer.

Please do not hesitate to contact our billing department at 843-235-1222 ext. 202 with any questions related to services rendered.

Thank you,

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