

More of our patients are becoming enrolled in insurance plans with managed-care components that require referrals for visits to specialist physicians. As this is a change for many of our patients, who may be more accustomed to PPO-style insurance plans than HMO-style plans, we feel we need to make clear how the process for referrals works and why it exists, to help this run smoothly for both our patients and staff.

The purpose of the referral system is to control costs and avoid harm to our patients by requiring decisions for care to come through the primary-care provider. In this way, we can help you avoid undergoing costly and invasive testing that may not be necessary.

The process of completing a referral can be a complicated one, involving a large amount of time and paperwork on the part of our office staff. This is time for which we are not reimbursed; the referral is done so that your insurance will pay the specialist's bill, so that is not passed on to you. We complete these for you as a courtesy. Therefore, we require that you review and follow our guidelines for obtaining referrals.

First, please be familiar with whether your insurance requires referrals, and under what circumstances.

All routine, scheduled (non-urgent care) referrals must be authorized with Dr. Anderson during an appointment. If you have an ongoing problem for which you have seen a specialist for some time, make sure that this is discussed during your routine appointments to our office, since documentation is often needed to provide the necessary paperwork to the insurance company, and a lack of documentation will result in a delay in our ability to complete your referral. A delay may lead to your visit not being covered under the referral's active period, which may result in a bill to you.

Often, existing referrals expire within six months to a year, or after a certain number of visits. When you schedule an appointment to follow up with your specialist, please verify that you have a valid referral for your appointment date. We will not do back-dated referrals, and we cannot guarantee the ability of the staff to complete a referral for a same-day appointment. If we receive a call from the specialist office on the day of your appointment, you may be asked to reschedule.

If your insurance requires a referral for visits to urgent/immediate care centers, please be advised that we are not required to provide a referral simply because the time that urgent care centers are open is more convenient to you. If you have a problem that you believe requires an urgent care visit, you **MUST** call the office and speak to the staff (during office hours) or Dr. Anderson (after hours) to discuss the need for the visit. If she does not feel that your problem meets the criteria for urgent care, we will schedule you to be seen in the office instead, and we will not provide a referral for a non-urgent visit to the urgent care center. After you have been seen by urgent care, we ask that you call to schedule a follow up visit here within 48 to 72 hours. Your referral will be completed at the time of your appointment. No referral will be provided to a patient who does not follow up.

Please sign below to signify that you have read and understand this policy:

Signature: _____

Date: _____