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Notice of New Billing Practices

Dear Patients of Dr. Allen Stark,

We will soon be implementing a specific change to our billing and collections policies. This document is to notify you of these changes and help you understand them fully before we transition to them. Please read it carefully.

Starting October 1, 2017, we will no longer be filing claims with out-of-network insurance companies. Patients with out-of-network insurance coverage will be required to pay Dr. Allen's full fee at time of service. We will happily supply documentation that will allow you to file an insurance claim for your session.

This will allow us to streamline our collections process and puts control of your insurance billing directly into your hands.

What Does This Mean For You?

If you are covered by out-of-network insurance (such as Aetna, Cigna, MHN, Health Net, Lifewise, or Value Options):

We will not be filing claims to your insurer. However, we will supply documentation that will allow you to file a claim yourself. Your payment at time of service will be Dr. Allen's full fee.

If you are covered by in-network insurance (Blue Cross Blue Shield/Regence, Providence/Pacific Behavioral Health, ODS/Moda, Pacific Source, First Health Network, United Healthcare, or Legacy/UMR):

You are unaffected by this change. We will continue to file claims to in-network insurers. As before, your payment at time of service will consist of your copay, or your estimated co-insurance, or two-thirds of Dr. Allen's full fee if you are still paying off your deductible. You remain responsible for any balance not covered by your insurer, including any copays, co-insurances, deductibles, and denied claims.

If you have a different insurer as your primary coverage, and out-of-network insurance as a secondary coverage (dual coverage), you are responsible for paying us any balance not covered by your primary insurer, but we will supply documentation that will allow you to file a claim with out-of-network insurance for any such balance.

If an out-of-network insurance is your primary insurer, and a different insurance company is your secondary insurer (dual coverage), we will be unable to bill insurance for your sessions, but will supply documentation that will allow you to do so. Your payment at time of service will be Dr. Allen's full fee.

If you are covered by in-network insurance BUT your mental health benefits are "carved out" to out-of-network insurance:

We will not be filing claims to your insurer. However, we will supply documentation that will allow you to file a claim yourself. Your payment at time of service will be Dr. Allen's full fee.

If you are covered by Medicare or Medicaid:

You are unaffected by this change. As Dr. Allen is not a Medicare or Medicaid provider, patients with Medicare or Medicaid (including the Oregon Health Plan) will still be required to sign a private contract stating that they will not attempt to file a claim for their treatment. Your payment at time of service will be Dr. Allen's full fee.

If you are an out-of-pocket payor / have no insurance:

You are unaffected by this change. Your payment at time of service will continue to be Dr. Allen's full fee.

If Your Insurance Changes (Switch, Gain, or Lose Coverage):

You are required to notify us in the event you switch, gain or lose insurance coverage. Even if we are no longer billing your insurance, we require a scan of your current insurance card for documentation and possibly for prior authorization of medications. **Failure to notify us of changes in your insurance status in a timely manner may lead to termination of your or your adolescent's care at Lake Oswego Psychiatric Associates.**

If you have out-of-network insurance and you switch to / gain insurance coverage through an in-network insurer:

It may take 1-2 business days to verify the policy. Until we have verified your coverage, you will continue to pay Dr. Allen's full fee. You are also responsible for any balance owed for past sessions. Once we have verified your coverage, your payment at time of service will consist of your copay, or your estimated co-insurance, or two-thirds of Dr. Allen's full fee if you are still paying off your deductible. You will be responsible for any balance not covered by your new insurer, including any copays, co-insurances, deductibles, and denied claims. We will file claims for your sessions to your new insurer.

If you have in-network insurance and you switch to / gain insurance coverage through out-of-network insurance:

You are immediately subject to payment of Dr. Allen's full fee for future sessions, as well as any balance accrued from past sessions not covered by your former insurer. For future sessions, we will supply documentation that will allow you to file a claim yourself.

If you switch to / gain insurance coverage to Medicare or Medicaid:

You are immediately subject to payment of Dr. Allen's full fee at time of service for future sessions, as well as any balance accrued from past sessions. Additionally, you must sign the private contract for patients with Medicare if you wish to continue as a patient at Lake Oswego Psychiatric Associates.

If you lose all insurance coverage:

You are immediately subject to payment of Dr. Allen's full fee at time of service for future sessions, as well as any balance accrued from past sessions.

How Much Is A Session?

We are required by law to use separate codes to bill the medication management and psychotherapy parts of your sessions; therefore, there are two procedural codes and two fees associated with most sessions. Since Dr. Allen tailors your sessions to your specific needs and case, we will price the appointment after you have had it. Payment is expected immediately following your appointment. During this time, if you wish, we will also prepare documentation for you to aid you in submitting insurance claims.

Session fees depend on their length and content. Here are some examples of what may be charged:

Initial diagnostic visit: \$450

Typical 30-minute medication management appointment: \$225

Typical 45-minute psychotherapy and medication management appointment: \$320

Appointment Policies Reminder

Please refamiliarize yourself with the following appointment policies as they will be enforced. **Failure to comply with office policy may lead to termination of your or your adolescent's care at Lake Oswego Psychiatric Associates.**

Payment Policy

In order to control costs, payment is due **at time of service**. Any alternate payment arrangements must be discussed with and approved by Dr. Allen in advance of your/your child's appointment, not the day of.

If you send your adolescent to their appointment without you, you must send them with a check or call our office in advance of their appointment to pay for their session.

Repeated nonpayment at time of service may lead to termination of you or your adolescent's care at Lake Oswego Psychiatric Associates.

Missed Appointments

There is a fee of \$150.00 for a missed appointment or an appointment cancelled without a full business day's notice. The staff gives courtesy appointment reminder calls, but you are responsible for remembering your/your child's appointment date and time. We request payment in full of any missed appointment fee within 30 days. You may be required to sign and keep to a payment plan if you are unable to pay these fees in a timely manner.

Missed appointment fees are not reimbursable by, nor chargeable to, your insurance.

Account Balance

Account invoices are sent at the beginning of every month, and you will only receive one if you have a balance or credit. We request payment in full of any account balance within 30 days of invoice. You may be required to sign and keep to a payment plan if you are unable to pay your balance in a timely manner.

Lateness

Dr. Allen has reserved your appointment time for you. If you arrive late, the appointment time may be unable to be extended, and you will be charged for the full session.

If Dr. Allen arrives late, only the time actually spent with Dr. Allen will be charged.

Medication Refills

Ordinarily, Dr. Allen will write your prescription for new medication, or medication with changes, at the time of your appointment. If you are taking a non-controlled medication that can be refilled and have no side effects, you may call your pharmacy to request that they fax the refill authorization to our office at fax number (503)635-5414. Please allow five days for this authorization to be processed.

Be aware that if your prescription is a controlled substance, this prescription must be filled in an appointment with Dr. Allen.