

DOCTORS CARE SLIDING-FEE-SCALE PROGRAM GUIDELINES

The physicians and hospitals participating in this program have agreed to help those in our community who are without health insurance and in need of medical care. For adults, Doctors Care is designed for **chronic and acute medical care only**. The program does *not* provide adult preventative care.

Doctors Care provides temporary assistance. It is not intended to take the place of health insurance or as a long-term solution for receiving health care. Adults may be eligible for a maximum of two years *in their lifetime*.

Doctors Care will backdate up to 90 days for first-time patients and those who have chosen to put their coverage on hold. In order to take advantage of this, patients must notify the eligibility counselor of the date needed for past medical bills and must contact all medical providers, doctors and hospitals within 14 days of receiving coverage.

PARTICIPATION CARDS AND PROGRAM RENEWAL:

Sliding-fee-scale services are provided in six-month intervals. However, you may notice that your first card is only valid for 90 days. This is because the first 90 days are your **probationary period** to ensure proper usage of the program. As long as you have been compliant with the expectations laid out for you in these guidelines and your Contract for Participation, you will automatically be sent a new card approximately one week prior to the expiration date on this first card for the remaining 90 days left in your first six-month enrollment period.

After the initial six-month period, it is **your responsibility** to keep your Doctors Care enrollment current.

- a. A new application will be mailed to you the month prior to your expiration date. If you do not receive the application, it is your responsibility to call and request one.
- b. You will be responsible for all services rendered between the expiration date and renewal date if you do not send in your renewal paperwork by the end of business the day before your card expires.
- c. If at a six-month renewal you no longer need Doctors Care services, please contact us to “save” the remaining time on the program. At a later date, you may choose to come back onto the program by completing another intake appointment. You *will* be eligible for backdated coverage (up to 90-days). If you do not contact us when your card expires, you will not be eligible for backdating upon returning to the program.

PRIMARY CARE PROVIDER:

A primary care provider (PCP) is assigned to every patient on Doctors Care.

Please follow these guidelines:

1. Make an initial appointment within your first month of eligibility to be seen for the medical reason(s) for which you applied for the program. This is not an adult physical nor a “meet-and-greet.”
2. Be sure to identify yourself as a participant of the Doctors Care program.
3. Be prepared to present your card and percentage payment at your physician’s office.
4. You are responsible to make all of your own appointments. If you are unable to keep an appointment, you must call to cancel and reschedule as soon as you know you will not be able to keep the appointment.

Three or more no-shows to your PCP may result in immediate termination from Doctors Care.

REFERRALS:

If your physician needs to send you to a specialist, **the referral must be made by the physician through the Doctors Care office**. You will be responsible for the **full charge** of any specialist not authorized by Doctors Care.

Please note that not all physicians, their services or facilities are covered under the Doctors Care program. You will be held responsible for these expenses if you don’t obtain an appropriate referral.

One no-show to a specialist may result in immediate termination from Doctors Care.

PAYMENTS/COST OF SERVICES:

You are responsible for the payment percentage listed on your card for each service. Please **be prepared** to pay your portion of the bill at the time of each visit. You will pay a minimum \$10 payment for any visit/service if your percentage would be less than that.

If you are unable to pay the entire payment percentage at the time of service, it is your responsibility to make a payment plan with the service provider prior to the visit.

Non-payment at the time of service or by the due date of an arranged payment plan is grounds for termination from the program. Any bill which is sent to a collection agency will have the discount reversed, meaning that you become responsible for 100% of the charges, and you will be immediately terminated from the Doctors Care program.

Doctors Care Clinic:

Office visit co-pays:		Office hours for the clinic:	Please call (303) 730-1313
Plan A = \$10	Plan D = \$20	Monday – Thursday 9:00 -	to set up an appointment.
Plan B = \$15	Plan E = \$30	5:00 Friday 9:00 - 4:00	Walk-ins are not accepted.
Plan C = \$15	Plan F = \$30		

RESPECT

Because all providers within the Doctors Care network are volunteers, it is our expectation that patients treat them and their staff with the utmost respect. This includes being polite to office and medical staff, complying with treatment recommendations, and abiding by the rules and guidelines set by Doctors Care policies. **Not treating providers, their office and medical staff or any Doctors Care volunteer or staff member with respect is grounds for immediate termination.**

PRESCRIPTIONS:

Prescriptions will be filled only when written by your assigned primary care physician or an assigned specialist. If you are seeing physicians outside the program, Doctors Care cannot cover medications prescribed by them without pre-authorization. Payment is your responsibility at the time you pick up your prescription(s).

1. Prescriptions will be filled **only** at your assigned hospital’s pharmacy. Contact information for pharmacies is:

Walgreens at Swedish Medical Center, 499 East Hampden Ave., Englewood. (303) 788-8776.

Apothecare Pharmacy at Porter Hospital, 2535 S. Downing St., Denver. (303) 778-2427.

Littleton Apothecare Pharmacy, 7780 S. Broadway #190, Littleton. (303) 797-7377.

Sky Ridge Pharmacy: 10103 Ridge Gate Pkwy., Ste. 117, Lone Tree. (303) 468-0300.

Crown Point Pharmacy (at Parker): 9397 Crown Crest Blvd., Ste. 101, Parker. (303) 339-5333

Your prescription cost depends on your plan:

Plans A, B and C	Plans D, E and F
\$10 - Generic	\$15 - Generic

2. Only **generics** are covered. Doctors Care staff may be able to assist you in obtaining free brand name medications from the drug manufacturer.
3. There is the possibility that your pharmacy will not stock the medicine your physician ordered. The pharmacy cannot special order medicine. If this occurs, you will have to go to a retail pharmacy and pay the full price.
4. King Soopers, Target and Wal-Mart have many generic prescriptions available for \$4 per month. This is NOT associated with the Doctors Care program and not all medications are on this list. In addition Costco provides many prescriptions at rates lower than its competitors. It is up to you to decide whether or not to explore options which may be less expensive than Doctors Care.
5. Only a one-month supply or one package size, whichever is the lesser, will be provided per co-pay. Example: One inhaler or insulin vial will be dispensed per co-pay.

6. The following medication **will not** be covered:
 - a. Over-the-counter drugs, mental health medications, supplies that can be purchased without a prescription, birth control medications, appetite suppressants, weight loss drugs, nicotine replacement therapy, acne therapy for patients over the age of 18 years old and erectile dysfunction medications
 - b. Tri-County Health Department offers well-women checks and birth control on a sliding-fee scale.
 - c. Mental health medications can be obtained for less than most co-pays through King Soopers, Target, Wal-Mart or by using the drug companies' programs at www.pparx.com. Please ask for more information.
7. Needles for diabetes are covered in one-month increments, as well as 50 generic glucose test strips per month. You will be advised to sign up for the drug manufacturer's Patient Assistance Plan for all name-brand insulin. Doctors Care will cover brand name insulin **only for the first two months** while you sign up for the plan.
8. You must call at least 72 hours before picking up a refill prescription. This will allow the pharmacy time to call the physician for approval if needed.

CHRONIC PAIN MANAGEMENT

Doctors Care physicians will not manage chronic pain through narcotic medications. **Asking any partner provider for a narcotic medication for chronic pain is grounds for immediate dismissal.** We do have physicians who can perform injections and alternative medicine providers like acupuncturists, chiropractors and massage therapists.

BEHAVIORAL HEALTH:

Patients are encouraged to take advantage of behavioral health (mental health) services at the Doctors Care Clinic and with external providers. Referrals these providers must be made through the Patient Care Coordinator, but do not need to come from a PCP. Patients may self-refer by calling the Patient Care Coordinator. *Please note that although mental health medications are not covered through Doctors Care, many low-cost options are available.*

Prices for appointments at the Doctors Care Clinic:

Plan A = \$10

Plan B = \$15

Plan C = \$15

Plan D = \$20

Plan E = \$30

Plan F = \$30

Please call (720) 458-6200 to request a referral.

SUBSTANCE ABUSE:

Doctors Care behavioral health providers: 1) screen and diagnose clients for signs and symptoms of drug and alcohol dependence; 2) refer clients (when indicated) to suitable care sources for alcohol and drug treatment and support groups; and 3) continue to counsel and support clients to encourage them to stay engaged in appropriate treatment facilities and/or community support programs. Doctors Care does not provide drug or alcohol **treatment** to clients, however if it is determined that you have an addiction problem, you may be required to follow through on a referral to a treatment program outside of Doctors Care to remain eligible for the sliding-fee-scale program.

HOSPITALIZATION:

If you are going to be an **inpatient or outpatient** at Swedish Medical Center, Porter Adventist Hospital, Littleton Adventist Hospital, Sky Ridge Medical Center, or Parker Adventist Hospital, please present your Doctors Care card at registration. You will be responsible for the portion of the hospital bill represented by the payment percentage shown on your card.

RADIOLOGY:

Radiology services (x-rays, ultrasounds, etc.) are provided at each of the five participating hospitals by physician referral and appointment. **Check in at Outpatient Registration** before your appointment. You must present your Doctors Care card at the time of service and have your percentage payment ready. In addition to the hospital charges, you will also receive a bill from one of our radiology partners after the test. This bill is for the physician who reads your test and writes the report for your doctor. Please pay your percentage payment in a timely manner.

CT and MRI scans may be done through a private radiology partner instead of the hospital. They perform CTs and MRIs at a fraction of the hospital's rate; though the appointment must be made by the Patient Care Coordinator.

LAB TESTS:

If your primary care physician or assigned specialist determines that lab tests (blood work) are needed, they must be completed at your assigned **hospital's lab**. Please go directly to Outpatient Registration at your assigned hospital and they will direct you to the lab. Remember to present your Doctors Care card. Registration staff will determine your payment according to the percentage on the card. You are responsible for your percentage payment to the hospital at the time of the visit.

Please note: Do not have any blood drawn at your physician's office. You will be responsible for payment of lab work sent from the doctor's office to any other outside lab; this includes Quest and LabCorp Diagnostics.

ANESTHESIOLOGISTS:

Most anesthesia groups in the south metro area participate with Doctors Care. This includes South Denver Anesthesiologists, Guardian Anesthesia, OBGYN Anesthesia, Women's Anesthesia and Colorado Anesthesia Consultants. After any procedure involving anesthesia, you should receive a bill from one of these groups adjusted to your payment percentage rate. Please pay this bill in a timely manner.

CHANGE OF ADDRESS, PHONE NUMBER, OR INCOME:

Call the Patient Care Coordinator with any changes in address, phone number or income **within ten days**.

AFTER HOURS CARE AND EMERGENCY ROOM USAGE:

If you think you need to be seen immediately, but it is not a life- or limb-threatening emergency, you should first contact your primary care provider and follow his/her instructions, even after hours.

Doctors Care partners with Doctors Express Urgent Care in Englewood for after-hours urgent issues that are not life- or limb-threatening emergencies. They are open 8:00 a.m. to 8:00 p.m. 365 days a year and are significantly cheaper than using the emergency room. Check your intake packet for contact information.

If it will not compromise your health, you should use the hospital emergency room assigned to you. Please use the Emergency Room only when it is a **TRUE** emergency. The hospital portion of your bill will be covered at your payment percentage rate; however, **you will be responsible for 100% of the emergency room physician's charge.**

Inappropriate use of the Emergency Room is grounds for termination from the Doctors Care Program. If you need to be seen for a non life- or limb- threatening condition that cannot wait until your physician's normal hours, you must first seek advice from the on-call physician at their office and use urgent care if directed.

DOCTORS CARE CLINIC:

Children and young adults (newborn through age 30) receive primary care at the Doctors Care Clinic located at 609 W. Littleton Blvd., Ste. 100, Littleton, CO 80120. Health care providers at the Doctors Care Clinic have access to hospitals, physicians, laboratories, and x-ray departments.

Well-care visits and physicals for 3-18 year olds are performed once a year at your regular office visit co-pay plus any lab charges at the assigned payment percentage rate. Children under 3 are seen more frequently for well-care visits and immunizations. During the busy acute illness season, the Doctors Care Clinic performs physicals only if time permits.

**** To speak to someone after hours about your child's health problems which are not emergencies, you may call (303) 730-1313 for several advice line numbers.****

ADDITIONAL ITEMS NOT COVERED BY DOCTORS CARE:

Doctors Care is not able to cover the following: durable medical equipment, glasses, ambulance, emergency room physicians, dental charges, elective care, and adult physicals/preventive care. If you have any questions about coverage, please contact the Patient Care Coordinator at (720) 458-6200.

***** DOCTORS CARE COVERAGE WILL NOT BEGIN UNTIL WE HAVE RECEIVED ALL NECESSARY PAPERWORK. *****