



PATIENT HANDBOOK

TABLE OF CONTENTS

- Section 1: Introduction and Summary of Benefits
- Section 2: Frequently Asked Questions
- Section 3: Additional Office Policies and Customs
- Section 4: Fee Schedule

Patient Handbook – Section 1
Introduction and Summary of Benefits

Welcome!

Whether you have decided to join our family practice or are considering becoming a member, this *Patient Handbook* details how we differ from most traditional family practices and outlines our policies. If you have any questions after reviewing this handbook, please contact our office for clarification.

Sincerely,

The Office of Dr. Radley Griffin

Membership in our practice entitles you to the following primary care services:

- Acute care
- Comprehensive medical history review
- Annual preventative physical examination
- House calls

The following in-office procedures are also included:

- EKG
- Lipid and nutrient analysis
- Cryotherapy (ie., “freezing” of lesions)
- Urinalysis
- Strep testing
- Pregnancy testing
- Well-woman exams
- Blood sugar and diabetes testing
- Spirometry
- Pulse oximetry
- Laceration repair
- Suture removal
- Vaccinations such as season flu, tetanus and pneumonia
- B12 injections
- Joint/soft tissue injections
- School physicals

Additional benefits of membership include:

- Extended appointments for counseling, education and evaluation of complex medical concerns
- Labs conveniently drawn in-office
- Lab discounts
- Diet, exercise and stress-reduction counseling
- 24-hour access to your physician
- Direct cell phone, email and videoconferencing access to your physician
- After-hours medication refills
- Hospital advocacy or in-patient care
- Assistance in navigating medical options and coordinating with specialists
- Assistance in researching costs of prescription drugs and out-of-pocket procedures
- Quarterly newsletter
- Annual wellness report
- Portable electronic medical chart

Patient Handbook – Section 2
Frequently Asked Questions

How is your practice different from a traditional practice? There are many differences. Most notably, in a traditional practice a doctor may care for a few thousand patients. In our practice, the number of patients is limited to a few hundred. This is intentional as it allows Dr. Griffin and his staff to focus on one thing: quality patient care.

How quickly can I see Dr. Griffin? Our member patients enjoy same day and next day appointments, which start on time (no waiting!) and last as long as they need to.

Is there a limit to how many times I can see the doctor? There are no limitations to the number of visits you may have.

Can I email Dr. Griffin or call his cell phone? You may email Dr. Griffin with non-urgent inquiries at any time. Dr. Griffin provides his member patients with his personal cell phone number. Please reserve this number for medical matters that arise during non-business hours or if you have an inquiry that cannot wait until the next business day.

Does Dr. Griffin draw labs? For our patients' convenience, labs can be drawn in-office. These labs will be covered according to your individual insurance plan. If you have a high-deductible plan or do not have insurance, ask about the self-pay rates we have negotiated with a laboratory. We want to help keep your lab costs predictable and as low as possible.

What if I am hospitalized? Dr. Griffin may admit you to one of the hospitals where he is on-staff (Memorial Hospital, Tampa General Hospital, St. Joseph's Hospital) or—depending on the circumstances of your case—you may be admitted under the care of a hospitalist, with whom Dr. Griffin will work to coordinate care. Bills accrued during a hospital stay are the sole responsibility of the patient.

Can Dr. Griffin care for my child? Yes. However, we do not stock childhood vaccines. It is strongly recommended that your child have a pediatrician as well.

When do you make house calls? House calls are made when a patient is too ill to make it in to the office. Need for a house call is determined by Dr. Griffin.

Can Dr. Griffin solely provide home care? Dr. Griffin sees a handful of patients solely within their residence. A separate fee is assessed for home care patients and will be assessed after an initial consultation. How often the patient needs to be seen will be determined by Dr. Griffin.

Why do you require an annual fee? The flat, annual fee that patients pay for Dr. Griffin's primary care services allows us to offer the highest level of personalized care and access possible. Additionally, this fee ensures that your primary care costs are predictable and transparent.

Do I pay each time I see Dr. Griffin as well? No. The membership fee covers office visits and services.

Do you offer family discounts? Yes. Please see Section 4 of this Patient Handbook.

Can I pay the annual membership fee in installments? Yes. Patients may pay the yearly membership fee in monthly or quarterly installments. These payments are automatically billed to your debit/credit card on either the 10th or 25th of each month or quarter, depending on your choosing. The first 90 days of membership is non-refundable (and due upfront if paying monthly). Patients who pay in-full for the year may receive a 5% discount.

Why don't you accept insurance? The level of care and attention we offer our patients would not be possible if we were on insurance plans. In general, insurance-based practices require large overhead, which is met by maintaining high-patient volume. This can make it difficult to see your doctor in a timely manner and it often means less face-

time with your doctor. Our patients have peace of mind that Dr. Griffin will be there when they need him, in large part, because we have only a few hundred patients.

What is not covered by the annual patient fee? The membership fee covers services you receive from Dr. Griffin (listed in Section 1 of this Patient Handbook). Labs, radiology, hospitalization, and specialist visits are not included in the membership fee and will be covered according to your individual insurance plan.

Will my insurance reimburse me for the annual patient fee? No. But you may use your Health Savings Account (HSA) or Flex Spending Account to pay for the annual patient fee. This fee may also be deducted from your itemized taxes. Consult your employer or tax advisor for more information.

What if I have Medicare? There is no barrier to a Medicare patient's relationship with us. There are, however, federal regulations that dictate how we process Medicare patients (see below).

Will Medicare cover the annual membership fee? No. The membership fee is for services that are not covered by Medicare such as the annual preventative physical examination, portable electronic medical chart and telephone and email counseling. Federal regulation requires that Dr. Griffin submit a bill to Medicare for every service he performs and that is deemed "covered" under Medicare.

Do I have to pay co-pays or deductibles? Co-pays and deductibles are not relevant if you have private health insurance because we do not bill private insurance. If you are a Medicare patient, Dr. Griffin is required by law to submit claims for all services that are considered "covered" by Medicare. Medicare patients are responsible for any co-pays or deductibles, which are typically covered by a patient's secondary insurance.

Do you accept HMO or Tricare Prime insurance? We currently do not accept patients with HMO insurance plans or Tricare Prime. If you have this type of insurance, only your assigned primary care provider may make referrals and order tests for you.

Can you help lower my other healthcare costs? We help patients research their options, for instance, regarding prescription drug costs, health insurance, out-of-pocket procedures and laboratory testing. Additionally, our unique availability allows patients to call Dr. Griffin when they would otherwise seek medical attention at an urgent-care center or emergency room, saving them money.

What if I no longer wish to be a member? You may cancel your membership with the practice at any time and for any reason in writing. Billing will cease following 30-days written notice from the patient.

Is the membership fee refundable if I leave the practice? Refunds will be pro-rated and are calculated based on the balance of any monies paid in advance, minus the months used and non-refundable 90-day membership fee.

Can I meet Dr. Griffin before joining the practice? Prior to joining the practice, you will be scheduled for a consultation with Dr. Griffin. The purpose of this consultation is to interview Dr. Griffin, relay your expectations and determine whether our practice is the right fit for you.

Do patients sign a contract for care? Yes. You will be asked to review and sign a *Patient Agreement for Physician Services*. This document was written with legal counsel. Its purpose is to inform, guide and protect both patient and physician. The term of the Agreement is for 12 months and renews automatically provided the patient pays the membership fee each term.

What if there are changes to this Patient Handbook or Fee Schedule? Patients will be notified of changes made via either email or U.S. Postal Service.

Patient Handbook – Section 3
Additional Office Policies and Customs

Office Hours are by appointment only. We are generally in the office from 8:30 a.m. to 4:30 p.m., Monday through Thursday, and 8:30 a.m. and 12:30 p.m. on Fridays. We also offer before- and after-hours appointments, as we do our best to make appointments convenient for patients. Lunch is taken daily from 12:00 to 1:00 p.m.

Contacting Dr. Griffin is possible via telephone or email. If you need to reach Dr. Griffin during business hours, please call the office at (813) 350-9090. Member patients are given Dr. Griffin's personal cell phone number, which should be reserved for medical matters that come up during non-business hours or if you have an inquiry that cannot wait until the next business day. Additionally, we employ an answering service (the number is left on our office voicemail). The direct number to the answering service is (813) 931-2894.

Office Visits are scheduled at a standard 30-minute minimum and 120-minute maximum, depending on the circumstances of your visit.

Vacations are planned in advance. We will let you know how to reach Dr. Griffin and have your medical needs addressed during his absence. If you require face-to-face medical attention while Dr. Griffin is away, our office may arrange a visit with a local, qualified physician. The cost to see the covering physician will be assessed separately from Dr. Griffin's practice and is the sole responsibility of the patient.

Health Insurance is not a requirement for patients within our practice. However, we strongly encourage patients to have at least catastrophic coverage.

Please provide our office with your insurance cards (primary, secondary and prescription) at the time of registration. Having current insurance information is important when referring patients to specialists, placing lab or radiology orders and obtaining authorization for prescription drug coverage. Update our office if your insurance information changes. We cannot guarantee that your insurance plan will cover the cost of any procedure or prescription.

As a courtesy, our office will submit claims on behalf of patients with out-of-network deductibles less than \$1500. Depending upon your insurance plan, Dr. Griffin's services may apply to your out-of-network deductible. If that deductible is met, you may receive reimbursement from your insurance company.

Due to Florida law, our office may be required to accept this reimbursement. If we receive reimbursement from your insurance company, we will reissue monies to you in one lump sum at the end of the calendar year. Please contact your insurance company regarding questions about specific claims or reimbursement. If you prefer to submit your own claims, a form will be provided upon request.

Membership into the practice is limited so that our office may offer a high level of personalized care and service. Once capacity is reached, enrollment will be closed and a waiting list will be implemented.

Delinquent accounts will be assessed a \$25 late fee if payment is 30 days past due (applies to monthly and quarterly payments only). If payment is not made for 60 days (applies to monthly, quarterly and annual payments), the *Patient Agreement for Physician Services* is terminated and become null and void. Patients may be re-enrolled at discretion of our office and if membership capacity has not been reached. A \$125 fee will be assessed at the time of re-enrollment.

Narcotic Therapy may be appropriate for some patients. The risks and side effects of chronic narcotic therapy will be discussed. Payment of the membership fee does not guarantee prescription of narcotic pain medication.

Patient Handbook – Section 4
Fee Schedule

2010 Membership Fee Schedule

	Monthly	Quarterly	Annually (for 5% discount)
Adult	\$125	\$375	\$1,425
Married Couple	\$240	\$720	\$2,735
Family of Three (with one child < age 18)	\$285	\$855	\$3,249
Family of Four (with two children < age 18)	\$310	\$930	\$3,534
Ages 18-29*	\$75	\$300	\$900

* Discount included in price. If you are 29 years old and your 30th birthday is within 6 months of the membership initiation date, then the normal adult rate will apply.