



ASPEN MEDICAL GROUP POLICIES
PLEASE KEEP FOR YOUR RECORDS

Welcome to Aspen Medical Group! We strive to provide the highest possible quality of care for all of our patients while adhering to policies set by insurance plans, government organizations and HCA Physician Services. We have set these policies in place in an effort to best meet all of these goals.

Providers and staff

Our team of healthcare providers includes two physicians, Crista Keller and Megan Press, two nurse practitioners, Kate Johnson and Megan Watanabe, and a physician assistant, Kendrick Lane. All providers are qualified to evaluate and treat your medical issues. We recommend that you alternate your visits between one of the physicians and one of the midlevel providers. This increases your level of access to care while also maintaining continuity with a limited number of providers.

Each of our providers works closely with a medical assistant who performs an initial assessment during your office visits and who returns

messages, calls in prescriptions, and assists with insurance authorizations. Our front office staff schedules appointments and provides phone support. We have an in-office phlebotomist who draws blood and assists with coordination of laboratory services. Our billing coordinator and practice managers can often answer billing questions that cannot be addressed by HCA's billing department. Finally, our practice manager and care coordinator are available to help if there are questions or concerns about your experience with our office. If you do have a concern please ask to speak with a manager before leaving the office.

Contacting our office

You can schedule an appointment by calling us at 303-394-9355. Phones are answered Monday through Friday from 8:00 am-5:00 pm; we are closed for lunch from 12:30-1:30. You can also schedule an appointment online at aspenmedicalgroup.org. You can reach us through your patient portal as well; if you have not yet signed up for the portal you may do so the next time you are in the office.

If you call our office and need to leave a voicemail, please state and spell your name clearly, provide us with your date of birth and a phone number where you can be reached, and state your request clearly and briefly. Please allow 1-2 business days for non-urgent messages to be returned, and do not leave multiple messages for the same issue. You may also send us messages through the portal, but the portal should not be used for urgent messages or concerns. If you have an urgent concern, please call the office. In most cases, we will recommend that you simply schedule an appointment; we offer same or next day appointments to address urgent issues.

Scheduling appointments

You may schedule an appointment by calling the office or online. We reserve several appointments every day for urgent issues and will make every effort to see you for an urgent concern within 1-2 business days. Routine appointments such as annual physicals schedule out several weeks so please plan in advance. We make every effort to contact patients when they are due for appointments, but we recommend that you schedule your next visit before you leave the office to ensure timely

follow up. We will also contact you to confirm your routine office visits; please confirm your appointments.

If we are monitoring you for chronic health conditions, plan to come in for office visits twice a year. One visit will be an annual physical and the other will be a follow up appointment. If we are prescribing controlled substances or monitoring severe medical conditions, we may have you follow up every 3 months.

Prescription refills

Routine prescription refills can be requested by contacting your pharmacy directly and asking them to send us a refill request. When requesting automatic refills, please make sure that you provide your pharmacy with the same name you use at the office. Our computer system will not recognize you if the names are not an exact match.

Please allow one week for your refill request to be processed. If you are due for a follow up office visit, you may be provided with a short-term refill and asked to schedule an appointment. If you are requesting a brand-name medication please check with your insurance company to

see if the prescription will require a prior authorization; if so, please allow two weeks for processing.

Getting the most out of your appointment

Please arrive at least 15 minutes prior to your scheduled appointment; this will allow enough time for check-in, paperwork, and initial evaluation by the medical assistant. If you arrive more than 10 minutes after your scheduled appointment time, you may be asked to reschedule. Please bring an up-to-date list of all of your medications to each visit.

Most insurance plans offer a free, once- yearly preventive exam. This visit is intended to serve as an annual review of your medical conditions and to specifically address preventive care. While we may be able to address one or two additional minor concerns at your preventive exam, this may be subject to an additional co-pay or deductible payment. If you have several concerns to address it is best to schedule a separate appointment so that we have adequate time to address all of your concerns.

Test results

You will be contacted by phone, letter or through the portal with results of tests that we have ordered. All test results are reviewed by one of the providers before you are contacted with results. If results are normal, they may be published directly to your portal; you will receive an email when your results are available to be viewed. Our staff will contact you by phone if your results are abnormal or require follow-up evaluation. In most cases you will be contacted within 3-5 business days, but some test results take longer. Please contact us if you have not received results after 10 business days. In many cases lab work can be done prior to your visit and reviewed during your appointment. Labs done prior to visits need to be done at our office; we are not able to send orders to outside labs. Other tests, such as bone density scans or other radiology tests should be ordered during office visits.

Referrals to specialists

If you are referred to a specialist, please call their office to schedule an appointment and verify that they accept your insurance, then call our office to request an insurance referral. We will submit necessary documentation for your insurance referral and will send all pertinent

records to your specialist. Please allow 2 weeks for referrals to be processed. Please also verify that we have your current insurance information.

Completing forms and paperwork

Please schedule an appointment to complete forms or other paperwork such as FMLA or disability forms. Completing forms together with your provider helps to ensure that they are completed correctly.

After hours questions

One of the providers at Aspen Medical Group is available by phone for urgent issues arising outside of office hours that cannot wait until the office reopens. You can reach us by calling the office at 303-394-9355 and asking for the on call provider to be paged. You will be asked for your name, date of birth, phone number, pharmacy number and a brief explanation of your concern. Please make sure to provide us with a number where you can be reached immediately, as our providers will not make multiple attempts to call you back. If you need to page an on-call provider please recognize that you will be contacting them when they are outside of the office. They will likely not know your medical

history and will not have access to your medical record. We cannot answer routine questions, provide routine refills, or prescribe any controlled substances outside of office hours. We are limited in the scope of medical advice we can provide to you over the phone, and may simply ask that you go to an ER or urgent care or that you call back during business hours to schedule an appointment.

Cancelling appointments

Please contact us at least 24 hours in advance if you will not be able to come to your scheduled appointment. This allows us time to offer your time slot to another patient. Repeated missed appointments or same-day cancellations may result in dismissal from the practice.

Billing

We understand that medical expenses and insurance can be complex and difficult to understand. We will do our best to provide you with a cost estimate for our services and we strive to provide cost effective care. However, out of pocket expenses are driven largely by insurance coverage. If you have a high deductible plan, please let our providers know before they order tests so that they can assist with limiting your

out of pocket costs. Our billing is done through a centralized system at HCA. If you have a question about your bill you can contact the billing department at 888-422-7720. We also have a biller who works in our office and may be able to answer your questions. Our providers undergo extensive training to ensure that they code for their services appropriately.

Tell us about your experience

If you have any concerns about your experience in our office, please ask to speak with a manager before leaving the office. We strive to provide the highest possible standard of care and customer service. We expect all of our staff and providers to treat every patient with dignity and respect, and we ask for the same consideration in return.

If you provided us with your email address, you will receive a patient satisfaction survey within 24 hours of your visit. Please complete the survey to provide us with feedback on the services you received. These surveys are an important component of our performance reviews. If you have a concern or complaint, we first ask that you speak directly

with the practice manager so that we can try to correct the issue as quickly as possible.

Thank you for trusting us with your healthcare needs. We look forward to a long and healthy relationship.

Sincerely,

The Providers, Management, and Staff of Aspen Medical Group