

Jeffrey M. Blake, M.D., Inc.
Gynecology & Women's Healthcare

Jeffrey M. Blake, M.D., F.A.C.O.G.
Marilyn E. Frazier, A.N.P.-C.

For all appointments and questions: 765-646-8569

Main Office/St. Vincent Anderson
Roby Medical Building
141 W. 22nd Street, Suite 309
Anderson, IN 46016

St. Vincent Medical Center, Northeast
13914 Southeastern Parkway,
Suite 304
Fishers, IN 46037

PATIENT INSURANCE & RESPONSIBILITIES

1. *Does my insurance require me to see only certain physicians? If so, choose one accordingly or be prepared to pay out of pocket at the time of service.*
2. *Does my insurance require a referral from my primary care physician to be seen by a specialist? If so, call our office the day before your appointment to make sure that the referral has been obtained.*
3. *Does my insurance require me to pay a co-payment at the time of service (note: most require this)? If so, make sure to take some form of payment with you. Many claims cannot be processed until a co-payment has been received. Be prepared to pay with check, cash, credit/debit cards (Visa, MasterCard, Discover, AmExpress). We also partner with CareCredit, which is a healthcare financing option. **If you do not have your co-payment at the time of your appointment, you will have to reschedule.***
4. *Do I have a deductible on my insurance policy? If so, have I met it for the year? If there is a deductible and you have not met it, be prepared to pay at the time of service. Otherwise, you will need to reschedule.*
5. *If the specialist suggests additional diagnostic tests, are there designated facilities that your insurance requires you to use? If so, what/where are they? If another referral is needed, who is responsible to get it? Our labs are sent to **LabCorp**. If **LabCorp** is not in your insurance company's network, your bill will be adjusted so that you will not pay more than your usual responsibility "in-network".*
6. *Have you written down the time/day of your appointment? We request a 24-hour notice for appointment cancellations. Missed appointments (less than 24-hour notice) will be charged a \$25 fee. For Urodynamics' Testing and Diet Consultations, a 48-hour notice of cancellation is required and the fee is \$50. This is not covered by your insurance. More than three missed appointments may result in dismissal from the practice.*
7. ***Make sure you bring your current insurance card, photo I.D. or driver's license, and co-payment to your appointment.***
8. *Please bring, or confirm, that your referring physician has sent all medical records regarding the problems for which you are being referred. Please bring a complete list of all medications/herbal supplements/vitamins that you are currently taking (including the dosage of each), as well as a list of those to which you are allergic.*
9. *Patients will receive statements at the end of the month and at 30, 60, 90 days if overdue. There is a monthly \$10 billing charge added to the patient's balance for late/non-payment. In addition, there is a \$25 fee for any NSF (non-sufficient funds) checks. **ALL balances must be paid in full within 90 days to remain a patient at this practice.***

For more information regarding our office: www.drieffblake.com