

Stacy L Waneka, MD

My Financial Policy

2/5/23

Dear Patient,

First and foremost, thank you for taking this journey with me. Healthcare has changed and I remain committed to my role as a healer, prioritizing your health and wellness, and providing superior medical care. These goals are sadly incompatible with the insurance model of healthcare that now exists in the United States. With this in mind, I propose the alternatives here and hope that we can find something mutually beneficial and respectful.

I **do not** and **will not** contract with or accept or bill insurance (except Medicare).

Please keep in mind that I do **not** have staff and will look to you as a partner in the effort required to clarify insurance and/or pharmacy benefits, to collect other records and reports or to otherwise track down information.

Keep in mind that when referring to "**visits**", a **visit** includes any of the following: in-person, home visit, Zoom, email, text, or consultation on your behalf with another treating provider. A **visit** would also include a letter written on your behalf or the completion of a medical document or form. **And as you may already know, I simply do not answer phone calls so if you are trying to reach me, please use my email or text.**

FEE SCHEDULE OPTIONS (choose one below):

1. MONTHLY FEE: A monthly fee of \$200 will be charged per person per month regardless of access or visits. This monthly fee will accrue after an initial one-time set up fee of \$150. (The first month would therefore be \$350) This monthly fee can be discontinued at any time after 3 months with no penalty. There would be no additional fee for visits. I am able to offer a super bill for you to submit to your insurance for your convenience.

2. PER VISIT FEE: There would be an initial \$300 consultation fee for the first visit. Follow-up appointments will be billed at a variable rate based on time needed, from \$50 to \$200. Again, a super bill can be generated for your submission to your insurance payor.

SERVICES:

My services and expertise have expanded over the years. In addition to my primary care services as a family medicine physician, below are ways I am also able to be of service.

Medical review and advocacy:

Review and synthesize records and provide interpretation of current issues and recommendations for further consideration. I take pleasure in helping patients better understand medicine as a diagnostic and therapeutic tool for themselves or for family members. If I may be of service in reviewing outside medical records and providing you with discussion, explanation and/or recommendations, I am happy to do so. In this role, I would not be a treating physician but rather acting just as a consulting physician, a resource or advisor. It is your responsibility to collect and forward all necessary and relevant records and documents.

Psychopharmacology and mental health management:

I am available to see patients for the sole purpose of prescribing for and treating mental health diagnoses including depression, anxiety, and PTSD. You would or could maintain your primary care physician and in this role, I would serve as a consulting provider.

2/5/2023

Adult diagnosis of autism:

I am obtaining the necessary certification and experience to better provide adults with an autism diagnosis should it be warranted. I will certainly announce, with fanfare, when I am ready to assist patients on this journey.

NOTES:

- ❖ I expect patients to keep an insurance plan. My services are in addition to your current insurance plan.
- ❖ I do have the ability to generate super bills. I do not have the ability to submit them to insurance companies.
- ❖ The exception to this is Medicare, I do remain contracted with, and can submit to Medicare on your behalf.
- ❖ All prices and schedules are tentative and remain subject to changes and updates moving forward and I welcome your feedback and input.
- ❖ Other than Medicare services, payment is due in full at the time of service unless otherwise discussed. I am able to accept cash, check, Venmo (@swanekamd), or credit card payments.
- ❖ Current issues under advisement:
 - Paper vs. electronic records
 - After hours care
 - Physical location for in person care

I have read and understand the financial policy and I agree to abide by its terms.

Signature of Patient (or responsible party)

Date

Name of Patient