Annual Non-Covered Services Fee FAQs:

Q1-Does Family HealthCare still take private insurance and Medicare?

A- Yes, we will continue to take Medicare and the private insurances that we are currently contracted with. The Non-Covered Services Fee is not charged to patients with Medicare, Medicare Advantage, or Medicaid.

Q2- Is this fee mandatory?

A- Yes, this fee is required to continue as a patient of our practice

a. New patients who establish care with our practice will be required to pay this fee prior to their 2nd visit and annually thereafter.

Q3- What are my payment options for this annual fee?

A- Payment is due at the time of your 1st visit each calendar year. If your first visit is December 1, 2026, and your next visit is January 2, 2027, the annual fee must be paid on both of these dates.

Q4- Will my Flex spending (FSA) or Health Spending (HAS) account reimburse me for this fee?

A- We advise that you consult with your FSA or HAS plan administrator, employer or Human Resource Department to determine eligible expenses. Family HealthCare will provide you with a receipt for this paid expense.

Q4- Is this fee refundable?

A- No, this fee is non-refundable in part or in full once paid for the calendar year.

Q5- Will I still have to pay by copay/co-insurance or balance? Will this fee go toward my deductible?

A- Yes, all co-pays, co-insurances/deductibles and balances will be collected and have no relation or are affected by the annual fee.