

10. Termination clauses?

Individual practices may terminate after providing the required 60 days notice. To initiate this process, send an email to CCPN or EverMed DPC.

11. Consequence of delayed payments to practices?

It is rare that payments are delayed as employers pay in advance of the month of care (due to common state laws). Clinics are paid at the end of the month. The 30 day required payment period allows us to effectively coordinate payments to keep delayed payments to a minimum.

12. What is ShareFile?

ShareFile is the secure portal used by EverMed DPC to share Clinic Censuses (member rosters), general EverMed information, and clinic information. Clinics have the ability to manage staff access and restrictions for their ShareFile account.

13. How is credentialing handled?

Credentialing is not necessary per se as EverMed is not insurance. We partner with groups like CCPN because we trust their process of working with practices on providing integrated quality of care for the individual patient.

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14. What is meant by telemedicine and what must I offer?

Options are at the discretion of the clinic and may include email, secure texting, phone, and patient portal. EverMed does not require any specific option or service, only the availability of at least one of these options.

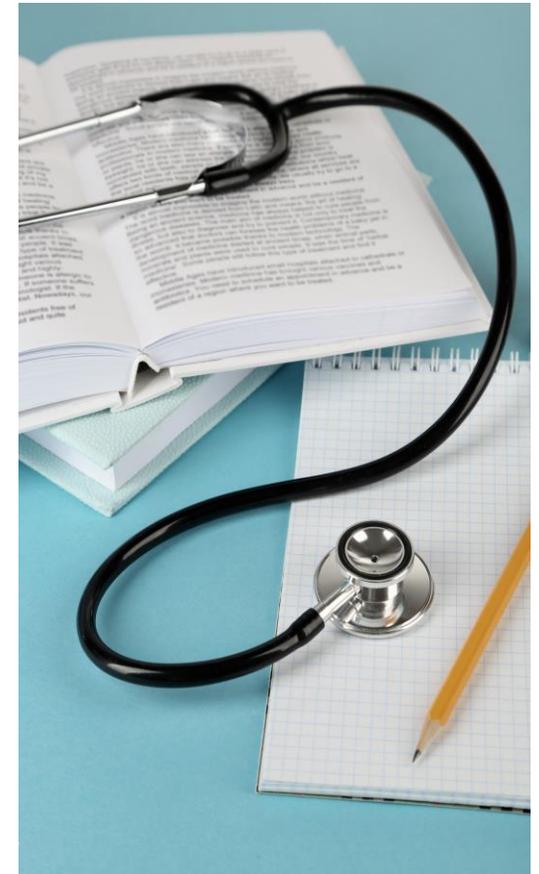
15. What if a patient arrives who does not carry insurance that I accept?

Your normal clinic procedures would apply. You may see the patient for the Included Services portion of DPC and refer out if appropriate, although the patient may have to pay out of pocket for non-included services. Many patients will have an HRA for billing non-included services as well. If you elect to exclude patients with specific plans, we do ask that you contact us so we can help the patient find an appropriate clinic.

16. What is the difference between DPC and concierge services?

While there is some overlap in the models, concierge services typically fall into two categories: all-inclusive or on top of billing insurance plans. Comparative to DPC, concierge plans are generally much more expensive to the client and more restrictive to the practice in plans they can elect to cover and number of patients they can see.

EverMed Clinic FAQ North Carolina



EverMed DPC



COMMUNITY CARE
PHYSICIAN NETWORK

FAQ

1. How are immunizations covered?

The cost of the immunization is covered by the employer health plan.

The cost of the immunization administration fee is covered under the DPC Included Services.

EverMed Members are covered by a variety of health plans with reimbursement based upon plan coverage. Most will be known carriers and plans with whom you already contract. Note that some services may be paid by the employee's HRA/HSA plan.

2. How is mental health care covered?

EverMed membership does not provide coverage for mental health services. Coverage is defined by the employee's Base Health Plan.

3. What are the reimbursements for in-house labs?

A minimal subset of POC labs are covered. Certain CPT codes are included in the EverMed DPC monthly fee.

4. What are the reimbursements for procedures? Spirometry, spot vision, wart freezing, frenectomy, circumcision, capillary blood draw, venipuncture, nebulizer treatment, etc.?

Some procedures are included in the monthly DPC fee. See the EverMed Included Services Menu.

Others will be paid out of pocket by the patient, billed to the employer health plan, or paid via the employee's HRA or HSA plan.

EverMed DPC Included Services are finite – designed to provide value based foundational primary care while generating positive revenue for the practice.

5. How is the referral network determined?

Most plans will follow the Employer plan, as customary.

6. What are the quality measures (Hedis, etc.)?

Quality measures are necessary only as required by the network contract of the employer's health plan or by CCPN.

7. What are the reimbursements for validated screenings? ASQ, Edinburgh, Scared, PHQ-9, MCHAT?

Annual wellness exam screenings may be included. See the EverMed Included Services Menu or CPT code list of specific screenings.

Screenings not on the Included Services Schedule may be billed per the employer health plan.

8. How are evening, weekend, and holiday visits covered?

There is no additional coverage although many EverMed DPC practices offer extended or weekend hours. Some form of after-hours coverage or referral should be available to membership patients

9. How do I increase or decrease my enrollment availability?

Practices determine the number of EverMed DPC enrollees they are willing and able to see. Practices may increase or decrease the enrollment limits as needed by emailing care@evermeddpc.com.

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