



## Hypermobility MD – Office Policies & Procedures

### INSURANCE POLICY

Hypermobility MD is an out-of-network practice and does not contract with or accept payments from any insurance company. We understand this creates challenges, but providing comprehensive care within the insurance model is not feasible for our patient population.

We do not submit claims on your behalf; however, a superbill can be provided upon request for possible reimbursement. Reimbursement varies depending on your individual out-of-network benefits.

Dr. Bluestein does not participate in Medicare or Medicaid. Patients with Medicare or Medicaid must sign additional required documentation acknowledging that **no Medicare or Medicaid payment will be made to you or to Hypermobility MD**, even if the service would otherwise be covered.

Laboratory tests, imaging, therapies, and prescriptions ordered by an out-of-network provider are *often* covered by insurance, but this varies by plan. **You are responsible for verifying coverage with your insurer.**

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### CARE AGREEMENT

Hypermobility MD provides **chronic disease management**, not acute or urgent care. All patients must maintain a primary care provider.

- New or unexplained symptoms should be evaluated by your PCP or urgent care to rule out unrelated conditions.
- For severe or worsening symptoms, call 911 or go to the nearest emergency department.

Medication changes or initiation of new medications occur **during scheduled visits only** after appropriate evaluation. They cannot be initiated through the portal, by voicemail, or by request outside a visit.

## OFF-LABEL TREATMENT DISCLOSURE

There are currently **no FDA-approved treatments** for Ehlers-Danlos syndromes or many related conditions. Medications and supplements prescribed may therefore be used “off-label.”

Some treatments may be contraindicated in pregnancy. **You must notify us if you are pregnant or trying to conceive.**

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## PAYMENT POLICY

All appointments must be **paid in full at the time of booking.**

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## NO-SHOW AND LATE CANCELLATION POLICY

- Appointments canceled **more than 2 business days in advance** may be rescheduled at no charge. The payment already made will be applied toward a future visit. **Refunds are not provided.**
- **No-shows** or cancellations **within 2 business days** of the appointment forfeit the appointment fee and cannot be rescheduled.

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## OUTCOME GUARANTEE

While Dr. Bluestein has a strong track record of improving symptoms and quality of life, **no outcome can be guaranteed.** Individual responses vary widely.

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## ELIGIBILITY REQUIREMENTS

Initial evaluations must occur **in person** in Colorado (CO) or Wisconsin (WI). Follow-up visits may be conducted via telemedicine **only if you are physically located in CO or WI** at the time of the appointment.

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## TELEMEDICINE POLICY

Telemedicine helps reduce barriers to care for patients with complex chronic conditions. Virtual visits are available for follow-up if you’ve been seen in person within the past year.

By scheduling a telemedicine visit, you acknowledge:

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- A small risk of data breaches exists with any online platform.
- Care may be limited due to the inability to perform a physical exam or collect in-office vital signs.
- You will be physically located within Colorado or Wisconsin.

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## LATE ARRIVAL POLICY

If you arrive late, your visit will still end at the scheduled time, and you will be responsible for the full appointment fee. Please verify the correct time zone when scheduling.

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## MESSAGING POLICY

Portal messages are for **non-urgent, logistical matters only** (e.g., scheduling questions). Portal messages are *not* a substitute for an appointment.

- If the provider must open your chart to respond, a **\$50 fee** will be charged.
- If your message requires clinical decision-making, you will be advised to schedule an appointment.
- Urgent concerns must be addressed at the ER or urgent care.

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## PRIOR AUTHORIZATIONS, APPEALS & MEDICAL NECESSITY LETTERS

Because EDS, dysautonomia, and MCAS lack FDA-approved treatments, insurance companies frequently require extensive documentation.

If a prior authorization, appeal, peer-to-peer, or letter of medical necessity is required, a **dedicated appointment must be scheduled** to complete this work.

Requests made **outside an appointment** will be billed at **\$400 per hour**. There is no guarantee of approval, although we maintain a high success rate.

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## DISABILITY & ACCOMMODATION FORMS

Our goal is to help you live as full a life as possible; therefore, disability documentation is not routinely completed, particularly for new patients.

If disability or accommodations forms are requested:

- Completion is at the provider's discretion
- Forms will only be completed during appointments

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- You should complete as much of the form as possible beforehand

Primary care providers are often better positioned to assist, as they receive fewer requests of this nature.

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## LETTERS

Letters may be drafted during scheduled visits. You are encouraged to prepare a draft to reduce provider time and associated fees.

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## OUTSIDE CONSULTATIONS

### Medical providers

If another medical provider contacts Dr. Bluestein directly (via direct email or phone provided by *their* office), she may respond at no charge. If you do not want outside-provider communication, notify us in writing.

### Non-medical personnel

Consultations with attorneys, schools, or other non-medical entities must be scheduled as non-medical appointments and will be billed accordingly.

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## RESEARCH

There is no charge for time spent reviewing medical literature or resources to enhance your care.

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## TEST RESULTS

Normal routine results may be communicated without a visit. If results are abnormal or require interpretation, a follow-up appointment must be scheduled.

Patients are expected to schedule follow-ups **at appropriate intervals** to allow test results to be available prior to the visit. Some specialty tests may take up to **6 weeks** to finalize.

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## LABORATORY, RADIOLOGY & PROCEDURE COVERAGE

Coverage varies widely. Hypermobility MD cannot guarantee that tests or procedures will be reimbursed. It is **your responsibility** to verify coverage before completing any study.

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## PRESCRIPTION REFILL POLICY

Refills are provided **only during scheduled appointments** and only when patients follow the recommended follow-up schedule.

### Routine refills

- You must schedule visits before running out of medication.
- Medications started by other providers should be refilled by those providers unless explicitly transferred.
- Requests made between visits incur a **\$35 administrative fee per prescription**.

### New prescriptions or prescription adjustments

Require an in-person or telemedicine visit.

### Controlled substances

Require visits **every 3 months** and an up-to-date Controlled Substances Agreement.

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## MEDICAL RECORDS

Your Hypermobility MD records are available through the patient portal.  
Records from other offices must be requested directly by you.

If we copy or transmit records on your behalf, charges may apply per state regulation.

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## RECORDING POLICY

Audio or video recording of visits is **not permitted** without written consent from Dr. Bluestein.

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# FREQUENTLY ASKED QUESTIONS

Q: How do I choose my appointment level?

Refer to the Gold, Platinum, and Diamond descriptions below to determine which level matches your needs, medical complexity, medication use, and goals for the visit.

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## **Gold**

A patient already diagnosed with hEDS or HSD who is seeking guidance for managing low to moderate pain. They take few medications and have a relatively uncomplicated medical history. As with all tiers, we will address as much as time allows during the session. A first follow-up visit is included in the package price, and additional follow-up sessions can be scheduled as needed to continue addressing ongoing concerns. Patients requesting medication prescriptions must adhere to the recommended follow-up schedule to receive refills.

## **Platinum**

A patient seeking evaluation for a possible hEDS or HSD diagnosis and wanting support for pain, fatigue, and poor sleep. They take a small number of medications and have several notable health concerns in their history. As with all tiers, we will address as much as time allows during the session. A first follow-up visit is included in the package price, and further follow-up sessions can be scheduled to continue care. Patients requesting medication prescriptions must follow the recommended follow-up schedule to maintain eligibility for refills.

## **Diamond**

A patient seeking a comprehensive diagnostic evaluation for hEDS or HSD, often with possible MCAS and/or POTS. They wish to address pain, fatigue, dizziness, and gastrointestinal symptoms. They take multiple medications and have a more complex medical history. As with all tiers, we will cover as much as time allows during the session. A first follow-up visit is included, with ongoing follow-ups available to address continued or evolving concerns. Patients who need medication management will be required to follow the prescribed follow-up schedule to receive refills.

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Q: How do I get questions answered between appointments?

Keep a running list to discuss at your next visit.

Q: How do I prepare for appointments?

Before each appointment, log in to the patient portal and complete all forms marked with a red exclamation point.

At least **48 business hours** before your visit, you must submit:

- Questionnaires
- My Medications
- My Supplements
- My Allergies
- My Vital Signs

Q: Why 48 hours in advance?

Submitting later may prevent adequate chart review and reduce the time available for direct care.

Q: My appointment is on a Monday—when are materials due?

**By Friday at 9:00 AM Mountain Time.**

Q: How do I update supplements or medications?

- Remove discontinued supplements and add new ones.
  - Add all medications through the portal; **send a message for removal of outdated medications.**
- Accuracy is essential for safe care.

Q: How do I get my medications refilled?

Bring your refill list to each visit to avoid fees.

Q: What do I need for telemedicine visits?

You must:

1. Attest to being physically in CO or WI
2. Submit vitals (BP, pulse) within 7 days
3. Log into Doxy 10 minutes early
4. Notify us at least 24 hours in advance if you require Zoom (note: Zoom is not HIPAA-compliant)

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Q: What else is expected of me?

You agree to read all messages from the office and to maintain accurate, up-to-date forms, medication and supplement lists, allergy lists, and vital signs.

Q: How do I share documents for review?

Upload **PDFs only**, at least **7 days before** your appointment. Items submitted within 7 days will be reviewed during the visit.

Q: What documentation is required before my first appointment?

Forms will be sent in advance; please follow the instructions exactly.