

Frequently Asked Questions

What is AMPA?

AMPA is a non-profit program which coordinates the donated care efforts of local physicians, medical service providers, and hospitals.

Who is Eligible?

Residents of Tennessee who reside in Washington County (or a resident from Carter, Johnson, or Unicoi county that is already connected with a Washington County provider) with an urgent or emergent medical need. Residents with no access to affordable healthcare and with an income at or below 200% FPL.

What role do primary care providers play?

Primary care providers are able to send referrals to AMPA for patient's urgent specialist needs.

Thank you for considering participation with our Program (AMPA). If at any time you have questions, please feel free to contact us. We are here to serve you.

By joining together this Network of Medical Providers, we gather strength and lighten the load.

Sincerely,

Project Access

Contact Us

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AMPA is a non-profit program which coordinates the donated care efforts of local physicians, medical service providers, and hospitals to the uninsured population of our community.

Provider Guide



How do I participate?

Request the **Participation Plan**.

Participation Plans are sensitive to office preference and are changeable due to circumstances.

The patients you agree to see through your Participation Plan are a significant link to income dollars from economically secure and/or insured patients.

What billing procedures are used?

AMPA is not an insurance company, so there is no reimbursement for services. AMPA patients are not billed for services. Your office will send us HCFA 1500 or UB-92 claim forms for any charges which will be written off.

Project Access is happy to do a presentation for your office. We will educate and inform your office on our procedures and take any additional questions you may have.

Benefits of Participation

Project Access has over 500 Participating Medical Providers. The Network of Care is made up of the major Hospital System, Community Clinics, HealthCare Centers, Physician Offices, Specialty Care Providers, Ancillary Services such as Laboratories and Anesthesia, as well as Support Services such as Home Health, Prescription Assistance, and Durable Medical Equipment.

Our Providers enjoy the protection of Senate Bill 1907 or Title 63, Chapter 6, Part 7 of TN Code Annotated... Health Care Providers are released from civil liability when rendering Voluntary Provision of Health Care Services.

Our providers also have the benefit of:

- **Customized Participation Plans**
- **Capped Commitment Levels**
- **Automated Rotation** - our software protects an individual or practice from contributing more than a fair share
- **Financial Screening** – approves only those patients who lack the ability to pay
- **Time Savings** – We schedule all Diagnostic and Initial Specialty Appointments
- **Cost Savings** – for billing and collection process which will prove unrecoverable
- **Fully Informed Treatment Plans** – ongoing communication and record sharing
- **Comprehensive Treatment Plans** – centered around a required relationship with a primary care
- **Respectful Encounters** – reinforced through patient education, behavior expectations, and disciplinary consequences

How do I refer patients?

Patients must be referred by a participating provider.

Complete a **Referral Form** for any of your self-pay, uninsured patients who fit our criteria. If the patient has a need for lab work, diagnostic testing, or to consult with a Specialist, attach any applicable test results, records, or notes.

How are initial enrollment visits coordinated?

After receiving a referral, AMPA will contact the patient to complete a screening process. If AMPA finds that they are a good candidate to assess for eligibility, an initial appointment will be set.

What about labs, diagnostics, hospitalizations, and medications?

AMPA enrollees have access to laboratory services, diagnostics, and both in-patient and out-patient services free of charge through the partnerships with our area's main hospital networks, safety-net clinics, and participating businesses. AMPA does not cover or pay for medications but can refer patients to prescription drug discount cards or community resources.

What are the patient's responsibilities?

Patients must comply with a Patient Responsibility Agreement Contract which includes both general and individualized medical, social, and behavioral components. Repeated violations of this agreement will result in disenrollment. Participating providers are notified of any changes in a patient's enrollment status.

Our patients have the benefit of Community Resource Linkage and Social Service Referral based on repeated Needs Assessments.