

Spectrum HYRO FAQS

1. Do you offer appointments after 5 PM?

NO

2. Does Spectrum provide services for individuals with autism?

Spectrum does not provide services for patients with autism.

3. Do you offer psychotherapy services?

Spectrum does not provide psychotherapy services.

4. Do you provide step-down services for patients discharged from inpatient mental health facilities?

Spectrum does not provide step down services for people discharged from an inpatient mental health facility.

5. Does Spectrum offer Medication Assisted Treatment (MATP)?

Spectrum does not provide medication assistance therapy.

6. Can I receive Suboxone treatment if I'm not a primary care patient at Spectrum?

Spectrum does not provide suboxone s..

7. Can I get GYN services if I'm not a primary care patient at Spectrum?

Spectrum does not provide GYN services for patients that are not our primary care patients. This means your primary medical Provider must be a Spectrum Provider.

8. Do you treat patients who have been in motor vehicle accidents?

Spectrum does not provide services for people that have been in a motor vehicle accident.

9. Do you provide services for individuals needing a commercial driver's license (CDL)?

Spectrum does not provide services for people needing a commercial vehicle license.

10. Can I get a employment physically at Spectrum?

Spectrum does not provide services for people needing employment physicals.

11. Do you offer telehealth visits for new patients?

Spectrum does not telehealth visit services for new patients

12. Will Spectrum fill out forms for new patients?

Spectrum does not complete forms for new patients

13. Can I walk in for services without an appointment?

While Spectrum accepts walk-in patients for certain eligible services, it is important to understand that availability is determined by the Provider's schedule at the time of the patient's arrival to the health center. Unfortunately, we cannot guarantee immediate availability for walk-in patients. Walk in appointments are based on provider availability at the time of arrival. Eligible walk-in services include, minor illness and minor symptoms like cold flu, sore throat, earaches, urinary tract infection, minor skin rashes or insect bites, QuantiFERON testing, Sexually Transmitted Infection testing and screening, pregnancy testing and birth control refills. If you want to make an appointment, call back at 215-471-2761 to see if one is available for today.

14. What should I bring to my appointment if I'm applying for the sliding fee discount?

Please bring your government or other official IDs, and your household income information if you will be applying for our sliding fee discount program

15. What forms do I need to complete each year to comply with state and federal guidelines?

To comply with state and federal guidelines the following forms will need to be completed each year: HIPAA and consent forms, household income information, patient agreement, preferred pharmacy and telehealth services forms.

16. Do I need to confirm my appointment ahead of time?

Appointments must be confirmed at least 24 hours prior to the appointment time to avoid cancellation

17. What is a Medicare Annual Wellness Visit (AWV), and how is it scheduled?

A Medicare Annual Wellness Visit (AWV) is preventive service covered by Medicare Part B, designed to access current health risk and create a personalized prevention plan. It is not a traditional annual physical, which Medicare does not cover. Patients are eligible for an Annual Wellness Visit once every 12 months after the first year of Medicare Part B enrollment.

18. Can siblings be scheduled together for appointments?

Siblings should be scheduled in back-to-back appointment slots. If you are attempting to schedule siblings back-to-back and the slots are not available please pick another day/date.

19. How often can I get an Annual GYN Exam?

Annual GYN Exams must be 366 days from the previous year and do not always include a Pap smear. As of 2022 women 21 years or older with normal pap smears only need to have one every 3 to 5 years based on their age. The patient's provider will determine when the patient needs a pap smear based on their medical history, risk factors, test and more.

20. Can I access behavioral health and psychiatric services if I'm not an established patient?

Behavioral health and Psychiatric services are reserved for patients who have established care with a Primary Care Provider at Spectrum.

A new patient is defined as an individual who has never received healthcare services at the health center or within the last 3 years.

21. What is Spectrum's no-show policy?

No Show policy is a term we use when a patient misses an appointment without cancelling it within one business day in advance. Appointments are in high demand. Schedule appointments around your availability to prevent unnecessary cancellations. Unfortunately, no shows inconvenience patients who need access to medical care in a timely manner. Any patient with three no-show appointments in a rolling twelve-month period will only be scheduled for same day appointments