**R & R Psychiatric Care**

**Practice Policies**

**New Client Policy**

* New clients must complete Patient Forms and Patient Intake documents. Please complete these forms at least 48 hours before your appointment time to avoid rescheduling your appointment.
* R & R Psychiatric Care does not provide evaluations for forensic or legal purposes, for custody evaluations, for the purpose of seeking medical or mental disability or leave of absence from work, or neuropsychological evaluations including evaluations for autism.
* At your first visit, please bring your insurance card, photo ID, list of current medications, most recent lab work, and any other pertinent medical records.
* Please arrive 5-10 minutes early for your appointment.
* The provider has blocked out a significant amount of time for your first appointment (90 minutes). If you need to cancel the appointment, please contact the office as soon as possible so that time can be made available for other clients. Cancellations made with less than 24-hour notice or missing your initial appointment will incur a No-Show Fee of $100.00.

**Appointment Policy**

* Services are by appointment only. You can schedule telehealth if you prefer unless advised otherwise by staff.
* It is your responsibility to make follow-up appointments for your care. You can easily request appointments or changes to appointments through your AdvancedMD Patient Portal.
* As a courtesy, we have an automated appointment reminder system that will text and email you appointment reminders. This is done as a service, and if for some reason you do not receive an appointment reminder, you are still responsible for showing up for your appointment.
* It is our goal to be on time out of respect for both your and our time, so please plan to arrive 5 minutes earlier than your scheduled appointment. If you are more than 10 minutes late, you may be asked to reschedule.
* There may be times when your provider is running late, and this is most likely due to special circumstances with a prior client appointment.
* On occasion, the provider may need to cancel or change an appointment to telemedicine. If for any reason the provider must change your appointment, you will be advised as early as possible by phone call or text message.

**No-Show/Late Cancellation Policy**

* If you have to cancel an appointment - it's no problem. We know that life happens. All we ask is that you notify us Monday through Friday of any cancellation at least 24 hours before your appointment. If we do not receive your cancellation in time, we charge a $60.00 fee for missed follow-up appointments. In the rare case that a new client appointment is missed, a $100.00 fee is charged. Please be aware insurance does not cover missed appointments, and that frequent missed and/or cancelled appointments may cause us to refer you to another provider for care.
* We are devoted to quality client care and respect your time so we don't double-book. Your appointment is your appointment. This means that each missed appointment is lost time that the provider could have spent helping another client. We greatly appreciate your acceptance of and cooperation with this policy.

**Insurance Policy**

* If we accept your insurance, we will file your primary and secondary insurance on your behalf. We do not submit to a third or more insurance plan. You will be responsible in submitting the claim if any outstanding balance is due after the first and second insurance has processed the claim.
* Your insurance policy is a contract between you and your insurance company. Health insurance may not cover all of the cost of your treatment. You are responsible for co-payments, co-insurances, deductible and any balance remaining after your insurance has processed the claim.
* If your insurance changes, please update your insurance information on your AdvancedMD Patient Portal or notify our office at least 48 hours prior to your next appointment so we can verify your new benefits. If you do not notify us in advance and we are unable to verify your new insurance, you may be asked to pay cash for the visit.
* Self-pay is available if we do not accept your insurance or if you do not wish to use your insurance. Our office has affordable rates for self-payment displayed on our website. Payment is due at the time of your visit.
* If you are self-pay, per the No Surprises Act, you will receive an annual Good Faith Estimate to help you understand the range of costs for your care.

**Payment Policy**

* Payment is due at the beginning of each appointment.
* Payment includes copays, a portion of your deductible if not met, applicable coinsurance, any past due fees, or any no-show or late cancellation fee.
* If you have a high-deductible plan and have not met your deductible, you will be charged $150.00 at the time of initial intake and $60.00 at the time of follow-up.
* If you have a past-due balance after applicable payments from your insurance company, you will need to pay your balance or set up a payment plan within 60 days. You may be asked to pay past-due balances when scheduling your next appointment. Any accounts past due after 90 days may be sent to our collections agency and may include termination of client-provider relationship unless other arrangements have been made. We don't ever want this to occur, so if you are experiencing issues with paying your past due balance, please give us a call to set up a payment plan.

**Forms of Payment Policy – Credit Card on File**

* We accept all major credit card forms of payment.
* You agree to have a valid credit card will be held on file securely through PCI-compliant industry standards within AdvancedMD, to be charged at time of service for any copays, deductible, or any applicable no-show or late cancellation fee.
* Your credit card may be automatically charged for any past-due coinsurance or other charges when billing statements are generated each month.
* You can update your payment information at any time with your provider, including the maximum amount that you would like your card to be charged each month.

**Prescriptions and Refills Policy**

* Prescription refills occur at scheduled medication management appointments. During your appointment, prescriptions are sent electronically with sufficient quantities and refills, if appropriate, to last until your next appointment. If by chance you run out of medication before your next appointment, please call your pharmacy to see if there is a script on file, and if there is not, please notify our office. Prescriptions may only be called in for clients who are current clients and who maintain their regularly scheduled appointments. For your safety, medication refills will not be called in over the weekend except in emergencies.
* Refills will not occur over the phone unless otherwise arranged with your prescriber. In these cases, it may take up to 72 business hours for prescriptions to be sent to pharmacy.
* Your insurance may require a pre-authorization for medication prescribed. We will submit appropriate paperwork as required by your insurance for any pre-authorization. However, your insurance company may take between 24 hours and up to 14 days to approve a pre-authorization, which could result in a delay of receiving your prescribed medication. When applicable, your provider may give you medication samples or provide you with a GoodRx discount card to pay cash for your medication instead of going through insurance.
* You are responsible for your controlled substance medication. Replacement scripts will not be sent if your prescription medication is lost, misplaced, stolen, or if you request it to be refilled sooner than prescribed.
* During your care, you agree to the following:

1) You will talk with your provider about any changes to your medication, including any medication-assisted treatment for substance use, or changes in any substance use.

2) You will not request or accept the same class of medication from any other provider/prescriber while you are receiving medication from this office.

3) You agree to comply with random drug testing.

4) You agree not to share, trade, or sell your medications; doing so may result in discharge from care.

5) Controlled substances only: Your history will be reviewed using the AZ Prescription Monitoring Program. Prescriptions may only be sent for a 30 day supply as required by law, so you may need to call your pharmacy each month to fill the next script on file for you. Please use the same pharmacy each time for script refill requests.

**Communication Policy**

* HIPAA allows for you to choose how you want to communicate, and receive communication from, our office, including phone, email, text, or secure communication. For your convenience, we have two preferred methods of communication.

1. AdvancedMD Patient Portal - a HIPAA-protected method of communication that allows us to easily share pertinent information about your care, route refills or medical records, and provide quick response to your inquiries. You can **send secure messages to your provider** and receive responses within 72 hours. You will receive access to this portal upon request when you schedule your initial appointment, or after your initial appointment has occurred. You can access your portal anytime through our practice website at [www.rrwellness.org](http://www.rrwellness.org).
2. Spruce Secure Messaging – an app that lets you send messages, files, and photos in a way that is HIPPA-secure. You can connect with our practice on Spruce by going to our practice website at [www.rrwellness.org/contact](http://www.rrwellness.org/contact)

* RISKS FOR EMAIL/TEXT: If you choose to email or text, there are a number of risks to consider when sharing information, including but not limited to the following: your messages can be stored in electronic files, could be received by unintended recipients, the message could be mis-addressed or missent, backup copies may exist after deletion, messages can be lost in transmission, messages can be used as evidence in court, and messages can be intercepted, altered, or used without detection or authorization.
* CONDITIONS FOR THE USE OF EMAIL/TEXTING: R & R Psychiatric Care uses reasonable means to protect the security and confidentiality of emails and texts sent and received. However, due to the above outlined risks, the security and confidentiality of information sent through email/texting cannot be guaranteed. R & R Psychiatric Care and its staff are not liable for improper disclosure of confidential information that is not caused by intentional misconduct. Clients must acknowledge and consent to the following conditions:
* You agree that if you use non-secure SMS text or non-secure email to send a non-clinical question (such as checking on appointment times) then the practice may respond in the same method of communication with a non-clinical response. You further agree that any HIPAA-related questions will be responded to with either a phone call or a message sent to your AdvancedMD Patient Portal.
* In emergency situations, texts or emails may not be responded to in time.
* Any email or text sent or received may be placed in your medical record, or a summary of the conversation logged as a client communication.
* R & R Psychiatric Care will not forward client’s identifiable emails/texts to outside parties without the client’s written consent, except as authorized by law and explained in the HIPAA Privacy Authorization.
* Use your best judgment when communicating sensitive medical information, as R & R Psychiatric Care and staff will not be responsible for the content of messages and is not liable for any confidentiality breach caused by you or a third party when emailing or texting.
* Complex or sensitive situations should be communicated during an appointment. You are responsible to follow up and/or schedule an appointment if necessary.

TELEPHONE CALLS

* ROUTINE: It is often difficult for providers to immediately respond to telephone calls. Routine brief phone calls made between the hours of 8:30 a.m. and 3:00 p.m. on weekdays will be returned as quickly as possible; calls will typically be returned within 2 business days. Routine calls received after 3:00 p.m. or on weekends will be returned the following business day. When leaving a message, please include whether it is urgent.
* AFTER-HOURS OR EMERGENT: R & R Psychiatric Care does not provide urgent care or emergency services. To get immediate care, you can call 911 for a medical emergency or 988 for the National Suicide Hotline, or go to your nearest emergency room or to a MIND 24/7 location.
* For more extensive phone calls, please schedule a phone appointment with your provider. There may be a routine charge for calls longer than ten minutes or excessive calls. Please note that some insurance companies will not reimburse for phone consultation fees.

**Closure of Care Policy**

* While at times you may no longer need our services, certain events could cause a closure of care from our practice with a referral to another provider:
* 2 or more No-shows and/or late cancels to appointments.
* Inability to make appropriate payments on outstanding accounts.
* Inability to follow the agreed upon treatment plan and/or the misuse of prescription medications.
* Display of inappropriate behavior toward the office staff and/or the provider.
* In addition, we routinely discharge clients who have not been seen in a period of 9 or more months who do not have a follow-up appointment on the schedule. Depending on the circumstances, we may agree to take the client back and continue services.

**Patient Care Records, Forms, and Additional Charges Policy**

* After your appointment, you will receive a Care Plan sent to your patient portal within 24 hours, located under Records, then Documents.
* Your provider may recommend additional testing for ADHD to be completed at a future appointment. The charge for this test is $30, in addition to any appointment charges, and is not covered by insurance.
* There are additional services that may require billing as well, including but not limited to legal depositions, contact with attorneys, or writing reports for the insurance company or your employer.
* We are happy to provide you with letters you may need such as Jury Letters, Emotional Support Animal, etc. at the time of your appointment, as long as it falls within the provider’s expertise and you provide pertinent information such as the type of letter needed, the addressee, and a fax number. We do charge $20.00 per page for any form, document, or letter; insurance does not cover this expense.
* Short Term Disability Forms or FMLA may be completed for established patients only if your provider takes you out of work. **You must schedule an appointment** in order for your forms to be accurately completed. We do charge $20.00 per page for any form, document, or letter; insurance does not cover this expense.
* We do not fill out Long-Term Disability forms or Social Security Disability Forms.

**ACKNOWLEDGEMENTS**

1. I have received a copy of all Practice Policies, have read and understand the information, have had an opportunity to ask questions about this information, and agree to all terms and will abide by these policies.

2. I specifically consent to have my credit card on file.

3. I agree that a photocopy or electronic copy of this consent shall be considered as valid as the original.

4. Expiration of Consent: This consent regarding practice policies will expire if/when the client has closure of care with R & R Psychiatric Care.

5. If applicable, I attest that I am the legal guardian and have the right to consent on behalf of this minor.

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Signature of Client or Legal Guardian Printed Name Date

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Name of Client if a Minor