



**PATIENT OFFICE POLICY**

**Welcome** to our practice. In an effort to maintain excellent communication between patients and our office, we have implemented this patient office policy to help make your visit to our office run smoothly.

All patients should have a scheduled appointment. We accept walk-in patients (schedule permitting) but prefer to schedule the patient to reduce waiting time. The patient understands that this appointment may require a wait, as the patient will be worked in between scheduled patients.

If a patient is more than 15 minutes late for his or her appointment, the appointment will be cancelled. Please read our "Medical Appointment Cancellation Policy."

We require prior permission from the parent or legal guardian to treat any child under the age of 18 years. Please make sure you sign the "Consent To Treat A Minor" form. We will not be able to see any minor without this signature.

Established minor patients under 18 years of age must be accompanied by an adult at all times, unless patient (who is at least 15 years old) is accompanied by a valid written authorization from the parent or legal guardian on record. This must also be verified with a telephone call from the parent or legal guardian before the scheduled visit. Please do not leave your children unattended as we are not equipped to watch them during your appointment.

We obtain a current driver's license and insurance card from each patient or legal guardian for each patient's chart. This information is obtained for verification purposes.

We require that each patient maintain current information in their chart. Each patient will immediately notify our office of changes to their information in order to update their chart.

We are dedicated to providing the best possible care and service to you and regard your complete understanding of your financial responsibilities as an essential element of your care and treatment.

- We collect payment at the time of visit (co-pay, co-insurance and/or deductible). We collect based on the information from your health plan. Sometimes the information given is incorrect. Patient's final responsibility will be determined when your insurance has processed your claim. Patient's balance is due upon notice from our office. An interest rate of ½% of the balance will apply if not paid in 30 days from notice, up to 6% per annum (if allowed by your health plan.)
- If you have coverage with a health plan for which we are not contracted or if you are a fee-for-service patient, the charges for your care and treatment are due at the time of the visit.
- If your health plan states a service to be "not covered", you will be responsible for the charge. Payment is due upon notice from our office. An interest rate of ½% of the balance will apply if not paid in 30 days from notice, up to 6% per annum (if allowed by your health plan.)
- There is a \$25.00 charge for a returned check. Payment to cover the new balance will be accepted as cash or credit card.
- For established minor patients, the parent or legal guardian is responsible for maintaining current information on file and making sure the patient is able to pay their responsible portion at the time of each visit.
- There is a \$15.00 charge for duplicating medical records coming to you. Please allow up to 10 days for us to process your request. Medical records sent directly to your new physician will not incur a charge.
- There is a \$15.00 charge for document completion (e.g., forms.) Please allow up to 10 days for us to process your request.

**I have read the policies of the practice and I agree to be bound by their terms. I also understand and agree that such terms may be amended from time-to-time by the practice.**

I, \_\_\_\_\_ (print name), have received a copy of Complete Family Practice & Sports Medicine's Patient Office Policy and Medical Appointment Cancellation Policy.

\_\_\_\_\_  
Printed Name of the Patient

\_\_\_\_\_  
Relationship to Patient (if patient is a minor)

\_\_\_\_\_  
Signature of Patient or Responsible Party if a Minor

\_\_\_\_\_  
Date