## Valley Endocrine Associates, P.C. OFFICE POLICIES

The physicians and staff at Valley Endocrine Associates strive to provide you with the very best quality care and ensure you a pleasant patient experience. Your cooperation with the policies listed below will assist us in providing that care.

**OFFICE HOURS:** Our office is open Monday through Friday from 7:00 AM-5:00 PM. Our phone lines are open from 8:00 AM-12:00 PM and 1:30 PM-5:00 PM

**LAB HOURS:** Our on-site lab is open from 7:00 AM until 4:30 PM. No appointment is necessary. You must be a patient of our office in order to utilize the lab. Outside orders will be drawn as a courtesy, ONLY if presented in conjunction with our order.

**INSURANCE:** In order for us to bill your insurance, you must present a current insurance card at each visit. If we do not have a valid card on file, you will be treated as a cash-pay patient and payment of our full fee will be expected at the time of service. When the card is furnished, we will file your insurance and reimburse you if your claim is paid.

**REFERRALS:** If your insurance requires a referral to see a specialist, a valid referral must be on file when you check-in for your appointment. It is your responsibility to ensure that your referral has been received. This must include a valid number of visits and a valid date range authorized by your primary care doctor. If your referral is not here at the time of check-in you will be asked to reschedule your appointment.

**ESTABLISHING CARE:** Once you have established care in our practice you will be expected to continue with the physician who saw you in consultation. If at any point you decide to discontinue the physician-patient relationship we require that you seek care outside of our practice.

**COPAYS:** Our insurance contracts require us to collect copays at the time of service. If your insurance plan requires a copay, it will be due at the time of your visit.

**BALANCE DUE:** If there is a balance due on your account, this must be paid in full prior to being seen. If you are unable to pay your balance you may ask to setup an agreement for a payment plan. Please be advised that a default on this agreement will result in your account being sent to our collection agency and further appointments will not be scheduled. Accounts that reach **90 days past due** will be sent to our **collection agency.** 

**APPOINTMENT CONFIRMATION/CANCELLATION:** We require confirmation of all appointments. Our automated system and staff will continue to call until we hear back from you. In the event that you do not return our calls, your appointment may be cancelled and given to another patient. We require a (24) hour notice for appointment cancellation. Our 24-hour appointment confirmation line is 480-626-6830. We reserve the right to charge a \$50 fee for missed appointments.

**PRESCRIPTION REFILLS:** Requests for prescription refills should be directed to your pharmacy. Prescription refills will be processed within 48-72 hours; please plan ahead and request your refills in a timely manner. Refills will only be approved if follow up visits have been kept.

**LAB ORDERS:** Lab orders are sent electronically to the rendering lab in accordance with your insurance. If you misplace your order, please contact the draw station to confirm whether or not they have an order on file. If it is necessary for us to mail or resend the order, you may be assessed a \$5 fee.

**EMERGENCIES:** Our office has an on-call physician who will be available for emergency coverage 24 hours a day. For questions and minor problems, please call the office during regular office hours. Prescription refills WILL NOT be addressed after hours.

**MEDICAL RECORDS/FORMS:** We require a minimum of 5 days to complete these requests. There may be a \$30 fee and payment is expected at the time the service is requested. If you prefer to pick up your records/forms we will notify you when they are ready.

Signature:	Date:	