

OFFICE POLICIES

Initial Visit –New Patient

- New patients are required to complete 'New Patient Registration' Form along with providing us a copy of photo identification such as driver's license, insurance card(s) and a copy of any pertinent records from your previous treating provider. New Patient Registration can be completed on-line at our website, www.cornerstonepsychiatric.com or in-paper form.
- Please bring your current psychotropic medication prescription bottles with you at your initial appointment.

Appointments

- Services are by appointment only and you should be prompt for your scheduled appointments.
- Payment is due at the time of service.
- Your appointment represents valuable time for both you and your clinician, we request that you notify us at least 24 hours in advance of a cancellation or need for change. If you fail to give the necessary 24-hour notice, a **\$60** fee will be assessed to you. Insurance does not pay for missed appointments.
- Frequent missed and/or cancelled appointments, may result in termination from the practice.

Prescriptions and Refills

- Prescriptions are sent electronically, and sometimes written or faxed, at the time of your appointment with sufficient quantities and refills, if necessary, to last until your next appointment. If by chance you run out of medication before your next appointment, please call our office or your pharmacy.
- Refill requests called in after 3:00 p.m. may not be sent to the pharmacy until the following business day.
- Patients that have been prescribed controlled substance medications are requested to use the same pharmacy each time for refills.
- Patients may be required to sign a Controlled Substance Agreement with this office.
- Controlled Substances history will be reviewed using the state of Florida Prescription Drug Monitoring Program database, E-FORCSE or any other approved system.
- Controlled Substance prescriptions will only be sent for 30 day supply. We DO NOT send 90 day / 3 month supply for controlled substance medications to local or mail order pharmacies.

Forms, Letters, Telephone Calls & Email

- Patients will be billed for time spent filling out forms and dictation of letters. **Minimum charge is \$25.00** per form, document or letter. This includes documents for disability, Jury Letters, Pet Letters, etc.. Insurance does not cover this expense.
- We reserve the right to bill you telephone calls between you and your clinician for the following reasons: excessive calls, you have not been in for an appointment for more than 90 days, your clinician requested we bill you for service provided.
- It is often difficult for our clinical staff to immediately respond to telephone calls. If your situation is urgent, please notify the receptionist at the time of your call and we will do our best to facilitate a timely response.
- As a courtesy, we have an automated appointment reminder system that will call, text or email generally one business day before your scheduled appointment. Again, this is done as a courtesy and not a requirement. At times this service may be down and not able to complete the appointment reminder. Ultimately, you are responsible for showing up for your appointment.
- We do not have email capability between patient and this office due to privacy issues, unless you and your provider agree to Patient Portal communication.

Financial Policy

- Payment is due at the time services are rendered.
- 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 is intended to cover some, but, in many cases, not 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.
- Most insurance companies have time file limits for claim processing. If you do not provide us updated insurance in a timely manner and your claim is denied, you are responsible for the charges.
- In the event of a returned check/NSF, a **\$20.00 fee** will be assessed to your account.
- We reserve the right to charge for missed appointments not called within 24-hours. The charge is **\$60** billed to you. Insurance does not cover missed appointments.
- Any accounts that are **past due after 90 days are subject to being sent to our collections agency and may include termination of patient-clinician relationship.**
- Outstanding Balances: If your patient responsibility balance becomes greater than \$300.00 at any time, **CPS** requires payment agreement be made and followed in order to continue treatment. If at any time it is determined that good faith payments are not being made on any account, **CPS** reserves the right to deny services until accounts are paid in full. Not fulfilling financial obligations to **CPS** is also grounds for discharge from the practice.