

## Bariatric and Metabolic Center of Colorado

## Colorado Endocrinology

At LiveNew, we strive to provide our patients with the best care possible. We endeavor to foster a safe environment of mutual respect for patients and staff. Please review and sign the office policy below, prior to initiation of medical care. By signing this document, you are giving us your permission to treat you.

As specialty consultants, we are always happy to listen, but we do not provide primary care services and do not give non-emergent medical care outside the scope of our field of practice.

Insurance Responsibility: Our office will assist in filing all the medical insurance claims related to your care in our office. It is the patient's responsibility to provide correct and complete insurance information at the time of visit. We do require an updated copy of your insurance cards and a government issued picture identification in your chart at each visit. Please notify us immediately with address or telephone number changes. For accuracy, you will be asked to verify your health insurance, demographics at each visit. If you do not have health insurance, our staff will provide information regarding the payment options available for the services provided. At the time of your visit, we may provide you services that your insurance contract denies as "non-covered" services. If you do not understand which services are covered and which are not covered, please contact your insurance directly and determine the extent of coverage and potential personal liability before we provide services to you.

<u>Co-payments:</u> These are a contractual agreement between the patient and their insurance company. Co-payments must be made at the time of service.

<u>Refund Policy:</u> Payments made to LiveNew for services rendered or for no-show fees will not be refunded. Payments made to LiveNew for clinical services that were never rendered (unless now-show fees apply) or for overpayments will be refunded if a request has been made within 90 days of the transaction. LiveNew is not responsible for any payments made to financing companies. All such queries must be directed to the financing entity.

<u>Prescriptions/Refills:</u> Please request refills with your provider during the regular clinic visit. Notify us of your preferred pharmacy. If you change pharmacies, update us with the correct information. Be clear on which medications should go to which Pharmacy. If prescriptions are needed between visits, call your pharmacy, so they can send an electronic request. **Please allow 3 business days for the refill to be completed.** Be aware, the on call doctor does not provide routine prescription refills.

<u>Lab testing:</u> Your insurance determines which lab facility is covered for testing. Please make sure you get your labs done at the facility of your choice and per your coverage plan, 7-10 days prior to your appointment. This will allow a more meaningful conversation with your physician.

**No show/Late cancellation policy:** If you are more than 15 minutes late, your appointment may need to be rescheduled. If it is necessary to cancel your appointment we ask that you notify us as soon as possible, as there are patients waiting for appointments. A \$50 fee will be charged for clinic visit no shows or cancellations less than 24 hours. A fee of \$100 will be charged for no shows/late cancellations for thyroid ultrasounds, thyroid biopsies, endoscopic procedures and all other procedures.

Finally, we strive to provider an environment of respect, safety and care for our patients. In turn, we ask that you treat our staff with respect. Cursing and yelling at staff will result in discharge from the clinic.

I have read this policy fully, and agree with the terms set forth above.		
Responsible Party (Print name)	Signature	Date