

Ingham Nephrology & Hypertension

Patient Responsibility Notice

APPOINTMENTS: We see patients by appointments only. We make every effort to stay on schedule, but delays do occur, and we ask that you understand the medical needs of other patients. Please arrive 10 minutes before your appointment time and have your Photo ID and Insurance cards ready to present at the check-in window. Please report all changes in address, phone number or insurance. Patient back balances are expected to be paid in a reasonable time period. We reserve the right not to schedule appointments if your account is not in good standing with INH.

As a courtesy, and to help patients remember their scheduled appointments, INH contacts the patient or designee via the phone number provided in advance of the appointment time. If your schedule changes and you cannot keep your appointment, please contact us so we may reschedule you, and accommodate those patients who are waiting for an appointment. As a courtesy to our office as well as to those patients who are waiting to schedule, please give us at least 48 hours notice.

NO-SHOW: This office requires a 48-Hour cancellation notice for scheduled appointments, failure to do so may result in a “no show” fee of \$50 to your account. This “no show charge” is not reimbursable by your insurance company and you will be directly billed for it. After two no-shows to your appointment, our practice may decide to terminate its relationship with you. Please understand you must cancel or reschedule any appointment at least 48 hours in advance in order to avoid a potential no-show charge. This fee must be paid prior to your next appointment with the provider.

LATE ARRIVALS: Please arrive at least 10 minutes prior to your scheduled time, late arrivals may not be seen, depending on the office flow that day. Please call the office if you know you will be late to the appointment.

CANCELLATIONS: INH requires a 48-hour notice if you must cancel and/or reschedule an appointment. You may call 517.485.8217 to reschedule or leave a message. This allows the scheduler ample time to fill your canceled appointment time with a patient who may have an urgent need to be seen. If you cancel the appointment with less than 48 hour notice you will be subject to the “no show” fee and policy as stated above.

MEDICATION REFILLS: When you need a medication refill, please call the Medical Assistant with your request. There may be up to a 7 day reply time for prescription refills. Please call your pharmacist to see when you may pick it up. If you have not had an appointment in the last 6 months, you MUST make an appointment prior to any refills.

FEES AND CO-PAYS: Co-pays are due at the time of service. We accept cash, check, Visa, Discover, and MasterCard. There is a return check fee of \$35.00. Please familiarize yourself with your insurance plans coverage and co-pay. Failure to provide sufficient proof of insurance will require payment in full at the time of your appointment.

MEDICAL FORMS: Requests to complete insurance, FMLA, or disability forms are completed as time allows, and we cannot guarantee a rapid turnaround time as our Providers have carried schedules. The fee filling out the forms is \$25.00, payable prior to receiving the finished forms.

MEDICAL RECORDS REQUESTS: The fee for a copy of your medical records is \$35.00 for the first 30 pages and \$0.25 cents per page thereafter, to a limit of \$50.00. Requests for records are completed in the order that they are received within a 30 day time frame.

BioTech LAB: When coming in for labs, sign in at check-in, and take a seat, the Lab Tech will be with you as soon as available. The office is very busy on Monday mornings and closed daily 12-1, should you choose to come during these times, you may have a longer than usual wait. Thank you for your patience.

I understand the above patient responsibility notice and agree to comply with the above.