



# Raising Sages Integrative Pediatrics

1601 Dove Street Suite #276 Newport Beach, CA 92660

Phone: (949) 788-1111 (Main) (949) 788-1110 (Fax)

## PRACTICE POLICIES FOR PATIENTS

Our goal at Raising Sages Integrative Pediatrics is to provide your child with the highest level of personalized care. We are committed to helping your child achieve optimal health. It is important to read all the enclosed information carefully and fill it in prior to your visit; this way any questions or concerns may be addressed efficiently at your visit and your time can be maximized.

### WEBSITE

Information about Raising Sages Integrative Pediatrics and all relevant patient forms are also available through our website, [www.RaisingSagesPediatrics.com](http://www.RaisingSagesPediatrics.com). By signing this form I give permission to Raising Sages Pediatrics to add me to their mailing list to receive periodic newsletters and updates from the practice. I understand that Raising Sages will not sell my information or let any third parties have my contact information without my expressed consent. I understand that if I do not choose to continue receiving this newsletter, I can unsubscribe at any time.

### MEDICAL RECORDS

Medical records can only be released with your authorization. A medical records release form is enclosed in this packet for your use. Please sign this form to allow us to obtain previous medical records from other physicians or health care providers. Your child's records should be mailed to: Raising Sages Pediatrics, PO Box 12257, Newport Beach, CA 92558.

### CONFIRMATION/CANCELLATION OF APPOINTMENTS AND LATE POLICY

We try to honor your time and we expect you to do the same. We block off considerable time to care for your child, and at times have to turn others away holding the space for your child. Unlike a large practice where you are 'just a number', if you do not show up, make a last minute cancellation or come tardy, we notice. Therefore, we kindly request that you come to all scheduled appointments, and if you are unable to make it, then call to cancel at least 24 hours in advance for a routine-scheduled visit. ***Your child's appointment must be cancelled 24 hours prior to your child's scheduled appointment or you will be charged \$50 or your office co-pay for that visit, whichever is more. We do send reminder texts or emails to you as a courtesy but the ultimate responsibility for remembering your child's appointment is YOURS.*** You may cancel your child's appointment by calling the office or using the patient portal to send an email to inform us of the cancellation. If a family shows a pattern of habitual last-minute cancellations/ no shows or tardiness, then they will be asked to find another practice that may be a better fit for them where this behavior will not have such a negative impact on the practice.

We do our best efforts to stay on time and avoid keeping you waiting any longer than necessary. However, patient tardiness has become an increasing problem and this results in the doctor running behind which in turn results in longer waiting for all parties afterwards, which is unacceptable to all. We request all families to arrive at their visit early (before their visit time) in order to get checked in, copays/balances paid, nursing

triage and vitals completed so that the doctor can start the visit on time and maximize the time with you. *If you are more than 15 minutes late, or arrive "on time" but then spend this time completing your paperwork then this is functionally a no show/ last-minute cancellation and will be charged the \$50 fee noted above.* We will do our best to accommodate your child, pending availability of the doctor, but we may either have to reschedule your visit or the time in the visit will have to be curtailed in order for the office to keep on time for the subsequent patients. I agree to the above terms and consent to my credit card being kept on file and charged for the above fees as needed.

#### PAYMENT OPTIONS

Our office accepts cash, debit card/checks or credit cards (Mastercard, Visa, Discover) for services rendered. *When you schedule the initial visit, we request a credit card number to keep securely on file to hold the appointment for you—we request this of ALL patients.* Only the final 4 numbers of the card are shown on file. No charges will be applied to your credit card unless you miss or cancel an appointment without notice or to use the card on file to pay for any outstanding balances due after the EoB has been processed through the third party payer.

Payment for services are due at the time of service: any copays, deductibles, co-insurance etc must be paid in a timely fashion. We expect that once the EoB has been run through your insurance and you receive a bill for the balance, that it will be paid at time of receipt within 30 days maximum. Any unpaid bills will ultimately result in being sent to collections for payment. We do not offer payment plans or carry balances with patients. If you do not pay your bills in a timely fashion or are sent to collections, then we will not see your child and you will be discharged from the practice at that time, or until the bills are resolved.

#### INSURANCE INFORMATION

Raising Sages Integrative Pediatrics is contracted with most of the PPO insurance carriers in this area and your visit will be billed according to your regular insurance rates, copays, etc. For those patients for whom we are not in their network, you can be seen as a Self-Pay visit at the rates. Any agreed upon services rendered outside the scope of your insurance coverage will be the patient's responsibility.

#### PHONE CALLS, MESSAGES & FAXES

1. Our office hours are Monday – Friday from 9 am to 5 pm. We are closed on weekends and all major holidays.
2. To reach Raising Sages Integrative Pediatrics, please call (949) 788-1111; our fax is: (949) 788-1110.
3. We have made available a patient portal to handle many of your requests, from refill requests to copies of vaccine records, requests for appointments, brief emails to the staff, etc. We encourage you to utilize the portal as much as possible for routine needs.
4. If you call after hours, your call will be handled by our contracted answering service who will assist you or will contact you to our nurse triage line for medical questions. You will be charged a \$20 fee for all after-hours calls to the nurse triage line or the doctor.
5. If you have a medical emergency, call 911 or go directly to the nearest emergency room, regardless of time.

#### PRIMARY CARE SERVICES

As your child's primary care provider, we will provide all the services one would normally expect from their general pediatrician. We provide well visits, vaccines, alternate vaccine schedules, sick visits and coordination of care for ER, hospitalizations and specialist consultations. We will make every attempt to work with your specific needs and inclinations as to our recommendations and always try to use the safest and natural remedies as appropriate.

#### CASH PAY/ CONSULTATION FEES

We have a Self-Pay fee structure that is largely time based on 15 minute increments. Please speak to the office for details at 949-788-1111. These fees are subject to change without notice to reflect the changing and increasing costs of healthcare delivery.

Vaccine/Medical exemption consults are NOT billable to insurance and therefore are done on a cash-pay basis only, even if we are in network with your insurance. This is due to the way insurance reimburses care and it is not possible to bill them for this service. Call the office for costs/ details.

**AFTER HOURS, ACUTE CARE AND HOSPITALIZATION**

For medical questions after regular office hours, please call the office at (949) 788-1111 to be connected to the doctor or the after-hours answering service. Please note that you will be charged a \$20/per call fee for this service, which will be billed to your credit card on file. Medical emergencies should always be attended to by calling 911 or visiting urgent/emergency care facilities. If we are your PCP, then we will make arrangements for your inpatient and hospitalization needs with the hospitalist group at CHOC Children's Hospital in Orange or Mission Viejo. For those patients with different PCPs (for example, an HMO consult visit), then any acute issues would be need to be addressed with your assigned PCP and their recommended facilities as we cannot authorize care for your child if we are not in network.

**SAME DAY/URGENT APPOINTMENTS**

We have same day/sick visits available and will make every attempt to see your child in as timely of fashion as possible. In order for you to not have to wait for extended periods of time in the office, and to not potentially infect the other children being seen in the office, we kindly ask to call and make a same day appointment, rather than just walking in whenever possible.

**PRESCRIPTION REFILL REQUEST**

It may take up to 72 hours to process a prescription refill (Although it should generally take much less time than that). Please plan ahead to avoid any interruptions in your medications. In general, refill requests can be handled quickly and easily through the patient portal. Otherwise, prescription refills can be faxed to our office by your pharmacy at (949) 788-1110 and we will attempt to process the request as quickly as possible.

**PATIENT FORMS**

It may take up to 72 hours to complete your child's forms. (Although it should generally take much less time than that). Please plan ahead to avoid any conflicts with school/camp, etc.

*My signature below indicates I have received this notice, read it in detail, and that I fully understand all its terms, including my responsibilities and assumed risks. I hereby give my consent and agree to all aspects of this agreement. I understand I am entitled to a copy of this agreement.*

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Print Patient's Name

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Patient's Signature or Signature of Legal Guardian

Date