

Professional Park Pediatrics: Policies and Procedures

Patient's Name: _____ Patient's Date of Birth: _____

For our patients to get to know our practice, we have outlined our policies and procedures. We ask that you read and sign below to indicate that you have read and understand the following:

Please initial each section to acknowledge you have read and understand the following policies and procedures.

_____ **Our Providers:** Our practice consists of 4 Doctors and 5 Nurse Practitioners. Appointment availability with your primary doctor may vary for urgent or non-urgent visits that need to be scheduled outside of routine well care visits.

_____ **Appointments:** Professional Park Pediatrics operates by appointment only.

_____ **Sick Visits:** Professional Park Pediatrics has triage nurses with 30 years combined pediatric experience and use a telephone triage protocol that is approved by the American Academy of Pediatrics. If you call our office during normal business hours, they will determine whether an appointment is needed or give advice for at home care based on the patient's age, symptoms, and severity of the illness. We schedule same day visits and other non-urgent office visits through our nursing line from 9AM – 1PM and 2PM – 5PM.

_____ **After Hours Care:** If you call our normal office number after hours, we have pediatric nurses available to assist with questions and advice regarding your sick child. For after hours advice, call our office at (850) 402-5454, follow the directions to leave a message, and a nurse will contact you within an hour.

_____ **Late Policy:** At Professional Park Pediatrics, we allow a window of **10 (ten) minutes** to be "late" for an appointment. If you arrive outside of this window, you may be asked to reschedule your appointment.

_____ **No Show Policy:** If you call after our 10 minute window, you are considered a No Show for your appointment. If you do not call our office prior to your scheduled appointment time to cancel or reschedule your appointment, you are considered a No Show. Excessive No Show's in our practice will lead to dismissal. PPP considers 3 (three) or more No Shows within a calendar year for an established patient/family and 2 (two) or more No Shows within a calendar year for a new patient/family to be dismissed from our practice.

_____ **Medical Record Fees:** Requested medical records will be sent with no charge to facilities for referrals, social security, DCF, etc. Excessive requests for medical record copies will result in charges being assessed. Upon the 3rd request for medical records, the fee is \$1 per page for the first 25 pages and \$0.25 per page in excess of 25 pages.

_____ **Patient Dismissals:** Professional Park Pediatrics believes that the physician/patient relationship must be one based on mutual trust. If there is a breakdown in this relationship, PPP reserves the right to refuse treatment. Reasons for dismissal include, but are not limited to the following:

- Dishonesty.
- Aggressive/inappropriate/threatening behavior (actual OR implied).
- Persistent non-compliance with treatment plans.
- Requests for service beyond our scope of care.
- Excessive No Shows (see above policy).
- Transfer to a local primary physician outside of our practice.
- Profanity usage of ANY sort.
- Refusal to vaccinate.

Signature of Parent/Guardian

Date

Professional Park Pediatrics: Policies and Procedures, Continued

Please initial next to each section to acknowledge you have read and understand.

_____ **Financial Policy:** As a courtesy, Professional Park Pediatrics will file claims for all services to your health insurance. At registration, you will be asked for your current insurance information. It is solely your responsibility to provide accurate and up-to-date insurance information and to notify us if there are any changes. It is also your responsibility as a parent/guardian to verify if Professional Park Pediatrics is in network with your health insurance company, and to be familiar with your benefits (i.e., copayments, deductibles).

You will be responsible for payments at time of service if:

- ***Copayments are required by your health insurance.***
- ***ANY additional testing is done at a well care/physical appointment due to an illness (i.e., strep test, flu swab, breathing treatment, etc.)***
- ***You have a secondary insurance (as we DO NOT file secondary insurances in our office)***

You will be responsible for a bill if:

- ***Services are not covered by your health insurance.***
- ***Your health insurance requires you to pay deductibles.***
- ***You have a secondary insurance (as we DO NOT file secondary insurances in our office)***

ALL payments are due at the time of service UNLESS a prior arrangement has been made with our office manager. Payment is expected to be made in full. The parent/guardian or person authorized to bring the patient in for the appointment is expected to pay at the time of service.

We accept cash, check, MasterCard, and Visa. If for any reason there is a bounced check, you will be responsible for the fee, and we will no longer accept checks on the account.

_____ **Custody/Divorce Policy:** Our providers believe that custody and divorce matters should not impact a child's medical care. PPP is not a party in custody/divorce matters, YOU ARE. PPP will not be a mediator between separated parents. Co-pays and deductible balances will be collected from the parent attending visits with the child. "Joint Custody" means that each parent has equal access to the child's medical record and patient portal. Without a court order, PPP will not stop either parent from looking at their child's chart, patient portal, or obtaining test results. We will not call the other parent prior to releasing information or for consent prior to treatment. Please note that we encourage both parents to be available for visits, whether in person or via phone. PPP also reserves the right to charge an administrative fee for copying records should the request become excessive. We also reserve the right to request copies of custody/divorce agreements for documentation. If the issues that come between two parents becomes disruptive to our practice and/or interferes with our ability to provide medical care to your child, we will discharge the patient(s) from the practice.

_____ **Vaccinations:** At PPP, our providers and staff strongly believe in the effectiveness of vaccines for prevention of serious illness. Our belief is that children and young adults should be vaccinated according to the guidelines of the American Academy of Pediatrics (AAP) and the Centers for Disease Control (CDC) for ALL state required vaccines for school and daycare entry starting at birth. We do understand the choice to vaccinate can be emotional for parents/guardians, and our staff will provide education and support regarding the importance of choosing to vaccinate. We ask that you understand it is against our office policy that the providers have set in place if you decide to "delay" or refuse vaccines altogether. Any parent that refuses to adhere to the AAP and CDC recommended vaccine schedule without a documented medical reason to do so will receive a dismissal letter from our practice within 30 days of being informed of your decision. Our providers are always happy to answer questions about vaccinations/vaccinating or to provide educational materials to you as well.

Signature of Parent/Guardian

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