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## OFFICE POLICIES

### **Scheduling**

Each scheduled appointment is time our providers set aside to discuss your concerns and/or monitor your progress. We ask that you please arrive on time, or even a few minutes early, for scheduled appointments so that we can enter/verify/update your information as necessary.

We strive to see all of our patients at the time their appointment is scheduled. However, there are occasions when, in order to provide the best care to our patients, our schedule is delayed. Please accept our apology in advance should this occur during your appointment time, but also know that the same level of care will be extended to you.

### **Children**

We are happy to see pediatric patients in our office. Children may also accompany a family member to an appointment, but may not be left alone in our waiting room if they are under 10 years of age; they may only be present in the exam room during the appointment of a family member if they are able to sit quietly and entertain themselves for the duration of the appointment. We appreciate your consideration in scheduling your appointments accordingly.

### **Late Arrivals Cancellations/No-Shows**

If you arrive more than fifteen minutes after your scheduled appointment time, we will make every effort to see you without interfering with other patient appointments. You may experience an additional wait, be asked to see another provider or be offered an appointment later the same day. Only if we are unable to do so will we ask you to reschedule for a later date.

Should you need to reschedule or cancel an appointment, we respectfully request twenty-four hours' notice. An appointment canceled or rescheduled less than three hours in advance of a scheduled appointment constitutes a "no-show." New patients who "no-show" for an appointment will be asked to pay a \$50 deposit to reschedule. Existing patients will be asked to pay a deposit to reschedule after a second "no-show," and patients who "no-show" for a surgery appointment will be asked to pay a \$100 deposit to reschedule. The deposit will be applied to charges for the rescheduled date of service. Patients with repeated "no-shows" may be terminated from our practice.

### **Cell Phones**

We ask that you please refrain from talking on your cellphone while in our office. Our staff cannot check you in or bring you back to an exam room if you are talking on your phone. If your appointment is unreasonably delayed because of a telephone conversation, you may be asked to reschedule.

### **Insurance and payments**

Piedmont Healthcare participates with most commercial insurance plans (a full listing of contracted plans is available on the PHC website at [www.piedmonthealthcare.com](http://www.piedmonthealthcare.com)). In most cases, if we do not participate with your plan, we will file a claim with them on your behalf as a courtesy. We cannot guarantee coverage or payment for services. We accept cash, personal check and debit/credit cards, as well as CareCredit.

### **Co-payments**

Co-payments are collected at check-in. Our contracts with insurance plans require that we collect these payments at the time of service. If your insurance plan does not require a copayment, you may still receive a bill for an unmet deductible or coinsurance. Depending on your policy, pathology and/or laboratory testing may be billed separately. Payment for all cosmetic services/products/procedures must be made in full at the time of service.

### **Outstanding Balances**

If your insurance plan includes a co-insurance or deductible, we are required to collect it. If they are not paid at the time of service, you will receive a bill from Piedmont Healthcare for charges not covered by your insurance. Failure to pay an outstanding balance may impact your ability to schedule subsequent appointments in our office. If you are unable to meet your financial obligations, you can contact the Piedmont HealthCare Customer Service Office (704-881-0214) to get information about payment arrangements.

Regrettably, we do sometimes refer patients who do not meet their financial obligations to outside collection agencies. If charges owed to us are referred to a collection agency, you will not be able to schedule an appointment in our office until the collection balance is paid or you are able to document six consecutive months of payments on the balance.

### **Patient Acknowledgement**

I acknowledge that I have read and understand the aforementioned policies.

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Patient/Parent/Guardina Signature

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Date