

PARK VIEW PSYCHIATRIC SERVICES

Main Office/Billing Office:
510 Spring Street
Jeffersonville, Indiana 47130

Satellite Office:
105 Crescent Avenue, Suite 1
Louisville, Kentucky 40206

Phone (812) 282-1888

Medication Department Fax (812) 285-8392
Medical Records Department Fax (812) 285-8393
Billing Department Fax (812) 218-9319

Patient Information Packet

Welcome to Park View Psychiatric Services. As you begin treatment, there are several pieces of information we would like to highlight. Hopefully, this will assist in a positive treatment experience with us.

First Visit:

- When you arrive you will be asked to complete a personal history form. This will assist the clinical staff during your Initial Evaluation.
- If the client is a minor, a legal guardian must be present for his/her first visit.
- If there is a custody agreement, we ask that you bring in court papers for clarification of custody/legal guardianship to be placed on the minor's chart.
- Please note that your first visit is for assessment and evaluation only. At the end of the visit, the clinician will make treatment recommendations. If Park View is not able to provide the services you need, you will be referred to a more appropriate resource.

Prescriptions:

Refilling Prescriptions:

For **stimulants** you will need to call the office for a written prescription **at least one week** before your next fill is due and leave a message for the medication assistant, or you can e-mail the medication assistant at medtech@pvpsychiatric.com. You must have an appointment on file in order to receive refills.

For **routine** refills you will need to have your pharmacy fax over a refill request to (812) 285-8392 **at least two business days before you run out.** Refills are handled Monday through Thursday between 8:30 a.m. and 5:00 p.m. You must have an appointment on file in order to receive refills.

For **mail order prescriptions** have them fax refill requests to (812)-285-8392 **at least one week** before your next fill is due, and an appointment must be on file in order to receive refills.

Refills are not handled in the evening, on weekends, or when the office is closed, so please make sure you call as indicated above to ensure enough time for your refill to be taken care of. Refills are handled Monday through Thursday between 8:30 a.m. and 5:00 p.m.

Patients on medication(s) must be seen at least every six months (or as deemed by your psychiatrist/nurse practitioner); however, prescriptions are not normally written for more than six months. (Only your doctor/nurse practitioner may make this exception.)

“What if I lose the prescription blank given to me?”

It is important to always keep the prescription blank in a secure place until taken to the pharmacy; this prescription blank acts as a direct order between your doctor/nurse practitioner and your pharmacist. If you lose or misplace your prescription blank, please call or e-mail and leave the medication assistant a message. Your doctor/nurse practitioner will determine the next step (rewrite prescription, call your pharmacy, etc.) State and federal laws may not allow another prescription to be written (in the case of certain types or classes of medications/controlled substances), so it is usually best to take the prescription blank directly to your pharmacy or keep in an area with other important papers.

“What if my medication is lost or stolen?”

For obvious safety reasons, it is best to keep all medications in an area of your home that is secure. If you discover that your medication is missing, please call or e-mail the medication assistant and leave a message. You will need to contact the police to file a police report and get a copy to our office. It is illegal for another person to deliberately ingest medication not prescribed specifically for them by a physician/nurse practitioner, and it is classified as theft if someone knowingly removes medications from your possession. This is for your protection. Your doctor/nurse practitioner will address occurrences on a case-by-cases basis.

*Please note that no early fills will be given on any Benzodiazepene/Stimulant. A tapered dose will be called into your pharmacy, and the medication will be discontinued.

“What if I have a medication question or problem before my next appointment?”

All calls for a doctor/nurse practitioner are routed through our medication assistant department. You will need to call the office at (812) 282-1888 and choose Option “4” for the medication assistant and then choose the option with your doctor’s/nurse practitioner’s name. Leave a **detailed** message including: name of patient, date of birth, etc. You may also e-mail the medication assistant at medtech@pvpsychiatric.com. The medication assistant will then forward this information to your doctor/nurse practitioner along with your chart for review. Please allow some time for the medication assistant to return your call as they have to wait for orders from the doctor/nurse practitioner before they return a call to you.

HIPAA (Health Information Portability and Accountability Act):

The misuse of Personal Health Information has been identified as a national problem. Park View Psychiatric Services is committed to following the HIPAA guidelines, and we strive to achieve the highest standards of ethics and integrity in performing services for our clients.

A copy of the full HIPAA law is available upon request. Park View Psychiatric Services has established a HIPAA compliance voice mail. If you ever have a HIPAA concern, feel free to call in and request voice mail box 199. Our Compliance Officer monitors this voice mail routinely.

Patients' Rights:

The Health Insurance Portability and Accountability Act (HIPAA) provides you with several new or expanded rights with regard to your clinical records and disclosures of protected health information. These rights include: requesting that the therapist amend your records; requesting restrictions on what information from your clinical records is disclosed to others; requesting an account of most disclosures of protected health information that you have neither consented to nor authorized; determining the location to which protected information disclosures are sent; having any complaints you make about the therapist's policies and procedures recorded in your records; and the right to a paper copy of the agreement, the attached notice form, and privacy policies and procedures. Requests to amend records must be made in writing; the HIPAA Compliance Committee reviews all requests.

Minors and Parents:

For patients under 16 years of age in Kentucky and 18 in Indiana who are not emancipated, their parents should be aware that the law may allow parents to examine their child's treatment records. Because privacy in psychotherapy is often crucial to successful progress, particularly with teenagers, it is sometimes the policy to request an agreement from parents that they consent to give up their access to their child's records. If they agree, during treatment the therapist will provide them only with general information about the progress of the child's treatment, and his/her attendance at scheduled sessions. Any other communication will require the child's authorization, unless the therapist feels that the child is in danger or is a danger to someone else, in which case, the therapist will notify the parents of the concern. Before giving parents information, the therapist will discuss the matter with the child, if possible, and attempt to handle any objections he/she may have.

Consent is not required and reports/disclosures will be made for the following:

- Abuse or Neglect – The practice is required by law to report suspected abuse or neglect to the appropriate government official (APS, CPS)
- Domestic Violence will be reported, following legal guidelines to the appropriate legal authority
- Public Health Risk Issues
- Legal authorities such as the Police, CPS, APS, Coroner or any other legal authority conducting a criminal investigation

Fees and Collections Policy:

The patient or legal guardian is fully responsible for payment of services rendered by Park View Psychiatric Services. Please understand that your mental health benefits have been received from your insurance company prior to your appointment. It is our policy to collect all co-payments deemed by your insurance on the day of service with each therapist, doctor, or nurse practitioner.

Patients/Legal Guardians are financially responsible for charges not covered by insurance. If payments for balance(s) due are defaulted, the patient is due to pay all costs of collections including court costs and reasonable attorney fees. **If your insurance policy that is being used is out-of-state, Park View Psychiatric Services reserves the right to collect fees when services are rendered and reimburse the patient when payment is made from said insurance.**

Below is a list of our standard charges, which you will be responsible for paying if your insurance company denies a claim. (Please note other codes may be used resulting in different charge amounts than those listed below.)

Initial Visit for a diagnostic interview with a Doctor/Nurse Practitioner	\$215.00 on average*
Initial Visit for a diagnostic interview with a Therapist	\$145.00 on average*
Follow-up session with a Doctor	\$ 85.00 on average*
Follow-up session with a Therapist (45 minutes)	\$100.00 on average*

*Fees may be higher based upon the complexity or duration of the visit and the actual codes billed.

PLEASE TAKE NOTICE
NO SHOW/ LATE CANCELLATION POLICY

Failure to give a 24-hour notice, not attending an appointment or walking out before being seen will result in a **\$25.00** charge for the following reasons. (Please note your insurance carrier does not cover this fee and it is patient responsibility.)

A patient is considered a “**late cancellation**” if the appointment is cancelled less than **24 hours** prior to the scheduled time.

A patient is considered a “**no show**” if the patient does not attend the appointment at the scheduled time and does not call to cancel the appointment.

Dedication to mental health treatment involves a commitment from your clinician to reserve time and be prepared for your session. Your commitment is to attend all scheduled appointments and follow through with all treatment recommendations. Consistency in keeping appointments is important to your treatment plan. If you have two or more no shows or late cancellations within a six-month period, Park View Psychiatric Services and its clinicians reserve the right to terminate your treatment. In addition, multiple cancellations, even with an advance notice, do not reflect patient commitment to the treatment plan and may also result in being terminated from treatment from Park View Psychiatric Services. Termination from two individual providers can result in termination from the practice.

After Hour Calls:

Park View Psychiatric Services provides after hour on-call services. A therapist and physician are on call to answer **EMERGENCY CALLS ONLY**. Non-Emergency calls will be billed accordingly (see list below). Charges for after hour non-emergent calls are as follows:

1-15 minutes	\$46.00
16-34 minutes	\$75.00
35-60 minutes	\$125.00

Most insurance companies will **NOT** pay for phone consults; therefore this fee will be the responsibility of the client.

*Please note that a general refill request is **NOT** considered an emergent call and will be dealt with **ONLY** during normal business hours Monday through Thursday between 8:30 a.m. and 5:00 p.m.

***If for some reason a return call is not received within 30 minutes or you need immediate assistance, please proceed with the most appropriate option:**

- **Call 911**
- **Proceed to the nearest hospital emergency room**

Medical Records:

One FREE copy of your medical records upon written request

Doctor's Office / Medical Facility medical records copy request – No Fee

Additional requests for copies of your medical records are \$10.00 for pages 1-15 and \$.35 per page for pages 16+ (progress notes and evaluations only unless otherwise specifically requested)

Requests for copies for legal purposes vary based upon time element requested

Disability / FMLA Forms \$50.00

Other Form Completion \$20.00 for 1 page, \$5.00 for each additional page

Legal Letters \$100.00

Other Letters \$20.00 for 1 page, \$5.00 for each additional page

Certification / Notary \$10.00

Please Note A consent to release or to obtain records **must** be signed prior to any information being sent to or received from another office. This includes any faxing of forms, records, or verbal communication, etc., to be sent out to or to be received from other offices.

Prior to leaving the office, please make all requests for records/forms through the medical records department in writing. If the Park View release of information is not signed in front of an office staff member, it must be notarized and the original mailed to the medical records department. No information will be released until this is received. If it is a request to be sent to another provider, notarization is not required.

Legal Fees:

Court Appearance / Deposition \$1,500.00 for first hour, \$600.00 per hour for each additional hour

Legal Consultation \$215.00

Legal Letters \$100.00

Other:

Returned Check Fee	\$25.00
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Payment Policy:

Park View Psychiatric Services is sincerely committed to providing you with the highest standard of care possible. If you have medical insurance, we will strive to help you receive your maximum allowable benefits. In order to achieve these goals, we need your assistance and your understanding of our payment requirements.

Payment for services is due at the time services are rendered to the extent of your initial responsibility. This includes any co-payment or uncovered service(s). For your convenience we accept personal checks, cash, money orders, Visa, MasterCard, and Discover Cards. Under no circumstances do we accept post-dated checks. We do not extend credit for any reason. We do not accept American Express. Returned checks are subject to a \$25.00 fee.

Medical Insurance:

There are thousands of medical insurance plans available in our area, each with various levels of coverage and payment benefits. There are deductibles, co-payments, co-insurance, yearly maximums and other benefit restrictions of which you must be aware, including whether or not the provider you are seeing is participating with your particular insurance company.

Our participation with your insurance carrier does not automatically entitle you to benefits for all services our office may provide. Your employer's benefit representative should be able to provide you with the details of your specific plan. You are entitled to the maximum benefit offered under your insurance contract; however, you are ultimately responsible for all expenses incurred in our office. Treatment is determined by our providers based upon patient need, rather than by insurance parameters. We will bill your insurance carrier. You will be billed for any additional co-payment, deductible, co-insurance or non-covered service not initially collected at the time of your appointment. You have made a contract with your insurance carrier. We do not take responsibility for any services denied by your medical insurance carrier, though we will assist you in appealing their decision if warranted.

If you have any questions regarding our payment policy or require further clarification, please do not hesitate to ask to speak with someone in our billing department located in the lower level.

Again, thank you for choosing Park View Psychiatric Services as your mental health provider.