



*We value all our patients and are committed to providing you with quality care.*

### **Practice Policy**

**Insurance.** A copy of your active insurance card(s) and photo ID are required at each visit. If you have an insurance plan where a primary care physician (PCP) is required (HMO policies) one of our providers must be selected prior to being seen. We participate in all major medical health plans including AHCCCS & Medicare. If you are not insured by a plan that we do business with or, you do not have out of network benefits, you will be held responsible to make payment for your visit. Knowing your insurance benefits is your responsibility.

**Patient Payments.** If your insurance policy includes a copayment and/or a deductible you are required to pay at the time of visit. This arrangement is part of your contract with your insurance company. Please contact your insurance for specific questions regarding your benefits. We will always do our best to assist.

**Prescription Refills.** We ask you please provide us with a 48-hour notice for your refill to be filled in a timely manner. Narcotics/Controlled prescription refill requests must be picked up in office.

**Referrals/Authorizations.** This process can take 7-10 business days to complete successfully. This time factor is dictated by your insurance company, so please be patient with us during this process.

**Missed Appointments.** Appointment cancellations are required to be made 24 hours in advance. A \$25 fee will be charged to your account after three missed appointments.

**Cell Phones.** As we care for you, please do the same by silencing your phone while in the waiting room and during your visit with our medical clinicians and physicians.

By signing below, you are confirming you understand and agree to follow our company policy.

\_\_\_\_\_  
SIGNATURE OF PATIENT/GUARDIAN

\_\_\_\_\_  
DATE

*We thank you for choosing Optima Medical for your healthcare needs and look forward to providing you with the superior level of care you deserve!*