

All (except Pagnani): RPA General Practice Policies

Office Policies

I. Appointments

Initial consultations are scheduled following a brief conversation by phone. A credit card is used to reserve your time. Evaluations are 60 or 90-Minutes in length (Child Psychiatry evaluations excluded, please discuss when scheduling) and consist of an extensive medical and psychiatric history. Laboratory studies and a brief neurological examination may be part of your workup. With permission, your provider may request collateral information from medical providers, family, or significant others to aid in case formulation and diagnosis. The initial evaluation is considered a consultation, as it is an opportunity for both the patient and provider to decide whether they are a good fit for ongoing care (individuals are responsible for the consultation fee regardless). Should both agree to work together after this consultation, follow-up appointments are either "Medication Checks" (20-minutes in length) or 45-minute therapy/ family appointments. We will collaborate to develop a treatment plan that fits your individual needs, which may include therapy, medication management or both. If you have a therapist that you would like to continue working with, we will be happy to collaborate with that individual, provided that you sign a release of information. At a minimum, on-going patients are seen every three months.

II. Payment of Fees

All fees are due at the time of service and payable by credit card (Visa, MC, Discover). Accounts that are delinquent may be sent to collections. All patients are required to keep an active credit card on file (used for missed appointments, phone appointments, late cancellations, administrative work, letters & family conferences). If a patient misses two appointments, they will be required to prepay via credit card when scheduling. There are no changes to these policies when someone other than the patient is paying for visits. Additionally, paying for visits does not change confidentiality; a patient's progress, medical record and any privileged information can still only be given with direct consent from the patient.

III. Missed Appointments/Weather Policy/Cancellations

If you are unable to keep an appointment, please give 48 business hours advanced notice (excluding weekends and holidays), otherwise you will be charged in full for the time that was reserved for you (for example, if your appointment is on a Tuesday at noon, you must cancel by the previous Friday at noon or you will be responsible for the full appointment fee). Insurance companies do not reimburse for missed appointment charges. You may cancel your appointment by calling the office and leaving a message. If you are late for an appointment, you will be seen for the remainder of your reserved time. You will be responsible for the full session fee (this includes initial visits). We do not close due to weather, unless it is a State of Emergency. If you miss a visit and we are unable to reach you by phone, your provider will run your

credit card on file for the full fee of the scheduled appt. Signing this form gives permission to do so. Two or more no shows or late cancellations within a calendar year may result in termination of the patient/provider relationship at the provider's discretion.

III. Prescription of Controlled Medications

- We take the prescription of controlled medications very seriously
- There should never be an expectation that a provider will write a patient for a controlled medication, even if the patient has previously taken a specific medication or previously been given a diagnosis (like ADHD, Anxiety or Insomnia) by another provider.
- If a patient has neuropsychological testing, medical records from another provider, or pharmacy records showing that they previously had a specific diagnosis or previously took a specific medication, we recommend that they bring that information to their first visit for their provider to review.
- Even when our providers deem that a controlled medication may be appropriate, they often will wait until a patient's second visit to write it, so that they have time to call the patient's previous pharmacies, review federal prescription databases, review records, and get additional information (like scales) completed by a patient or by family or significant others.
- If a patient feels that they "need" a controlled medication urgently prescribed, we are not the right practice for them to schedule with.
- A provider disagreeing about a patient's diagnosis or refusing to write for a controlled medication is NOT grounds for waiving the appointment fee.

IV. Medical Records

Our providers generally do not release patient evaluations, progress notes or therapy notes. A summary of care will be provided to patients and/or third parties when medical records are requested. The administrative rates apply to such requests and the card on file will be used for this service. (See Practice Fees form)

V. Release of Information and Collateral

With a signed release providers may discuss patient data or provide records with other providers and/or third parties. The release can be obtained on our website. Additionally, providers within Rittenhouse Psychiatric Associates may collaborate on cases without a signed release (for example, if a patient is obtaining care from both a prescriber and a therapist both within our practice, it will be assumed that they can coordinate care, even without a signed release). Additionally, it is assumed that covering providers will also have full access to the patient's chart. Finally, there may be instances where a provider assesses that it

is in the medical best interest of the patient to discuss their case with a third party without consent. Examples, include (but are not limited to) if a provider has concerns that a patient is at risk of harming themselves or others, is abusing a medication, is obtaining controlled medications from multiple providers, is having a severe side effect from a medication, or that a patient's medication may have a severe interaction with a medication being prescribed by another provider.

V. Medical Insurance

Rittenhouse Psychiatric Associates providers are out-of-network for all medical insurance companies. If you have out-of-network mental health benefits, we will be happy to assist you by supplying bills, diagnosis and other information that is requested by your carrier for reimbursement. Patients are responsible for submitting their own claims if they choose to do so. Reimbursement is not guaranteed. Insurance companies do not always reimburse for virtual appointments (even if a patient has out-of-network benefits), and it is the patient's responsibility to discuss this with their insurance company directly, prior to making an appointment.

Rittenhouse Psychiatric Associates and its providers do not accept or participate in Medicare, Medicaid, any Medical Assistance Program or Medicaid Managed Care Plans. Patients with these plans will be provided a separate waiver to sign. It is important for patients with these plans to understand that they may be able to receive psychiatric care at a significantly reduced (or free) cost outside of our practice. These federal and state programs may prevent patients from using their insurance to fill prescriptions, or prevent our providers from making referrals or handling prior authorizations. Patients also must agree to not submit any receipts for our services to Medicare, Medicaid or any state assistance programs. Patients are advised to directly contact Medicare, the relevant state Medicaid program, relevant Medicare Advantage plan, and/or relevant state Medicaid Managed care plan for more information.

VI. Office Coverage

If your provider is out of the office, they will leave the covering provider's information on their outgoing voicemail and in an automatic e-mail reply. For non-emergent issues, you may call the covering provider or leave a message for your provider's return. Prescription refills will be called in Monday through Friday 9AM-5PM. He/she will be able to respond to calls within 48 business hours. Covering providers do not refill controlled substances. Patients are responsible for keeping their appointments and re-scheduling (if they cancel or miss an appointment) several weeks prior to running out of controlled substances. We are not responsible for adverse events due to failure to do so.

VII. Medication Requests and Prescription Refills

Patients may call the office and leave a message for prescription refills. Refills are called in Monday through Friday only, during normal business hours. Please allow 48 business hours for all requests. If you have not had an appointment within the last 3 months, there will be an associated 25-dollar fee (charged to your credit card on file). Our office takes the prescription of controlled medications very seriously. An initial face-to-face appointment AND an in-office visit every 90 days at a minimum may be required by your provider,

the DEA and/or the state where you reside. We will not make exceptions to local or federal regulations. If you are prescribed a controlled substance, appointments will be required for refills. Lost or stolen controlled substance prescriptions will not be replaced under any circumstances. If patients are having withdrawal symptoms due to lost or stolen controlled prescriptions, they are responsible for going immediately to the ER or calling 911 to seek immediate medical attention (i.e. we will not break our controlled medication policies because a patient states that they are having withdrawal).

By signing here you acknowledge you have read, understand, and agree to policies on this page

VIII. Contacting Your Provider

Patients have access to their provider's business phone and patient portal (Simple Practice) messaging. Messaging is used for scheduling and canceling appointments, prescription requests and administrative requests only. Messages are added to the official medical record at Rittenhouse Psychiatric Associates' discretion. We can typically return calls and emails within 48 business hours Monday through Friday. When patients call with questions that can be answered quickly, a fee will not be charged. If questions require a lengthy discussion (for example, any medication change), patients will be asked if they would like to schedule an office or phone appointment (rates in Practice Fees form apply). You will never be charged for a phone call, without your provider discussing it first. If a patient is abusing access to their provider's phone or e-mail address, this may result in termination of care, at the provider's discretion. Social media is not an acceptable form of communication for current or former patients (no exceptions). Patients CAN "follow" our business accounts, but they are not to use social media for communication with Rittenhouse Psychiatric Associates. Texting is never an appropriate form of communication and business lines may not accept texts. Furthermore, your provider is not responsible for responding to any information sent via text.

IX. Discharge/Closing Charts

Our providers may "close" or inactivate a patient's chart for a number of reasons including but not limited to: a patient terminating care voluntarily (as when moving or finding a new provider), a patient violating a controlled substance agreement, a patient not following a provider's treatment recommendations, a patient's condition requiring a higher level of care than we are able to provide (as assessed by the provider), a provider assessing that they do not have the skill-set required to adequately treat a patient or their condition, lack of follow up at intervals specified by the provider, or a patient missing or late canceling 2 appts within a year. If a patient is not seen for 3+ months, providers will mail or e-mail a letter stating that their chart will be closed unless the patient contacts their provider within a specified period of time. When a chart is "closed," we are no longer able to prescribe you medications, schedule you for appointments, or assist if you are in crisis. You are responsible for ensuring that you have office visits every 3 months or less (exact timing determined by your provider, exceptions made on a case-by-case basis) and for keeping your address/e-mail updated with our office. We are not responsible for letters not reaching their intended destination if you move/get a new email and do not notify us. If a patient's chart is closed, and they would like additional information on resources in the community or finding a new provider, we will be happy to assist (call our office staff at 267-358-6155 x 1 or email Scheduling@RittenhousePA.com to receive our referral list). Additional information on finding a new provider is listed on our website:

www.RittenhousePA.com/resources. Your provider will also be happy to assist you directly. If your chart is closed, and you would like to restart care, we cannot guarantee availability or that we can see you back as a patient. It will be based on provider availability and discretion, and you may be required to have an initial 60-minute visit (rates in Practice Fees form apply).

X. Transferring Between Providers in Our Practice

If an active patient of one of our providers wishes to transfer to another provider within the practice, they are to discuss this directly with their active provider after filling out a transfer request form (see our "Intake Forms and PDFs" section of www.RittenhousePA.com). A transfer is dependent on BOTH the active provider confirming appropriateness to stay in the practice AND the new provider agreeing to accept the patient after reviewing the case with the active provider. A patient can transfer within the practice ONE time only. If a patient's chart was closed with the practice, or their care was terminated by their provider (for example, for breaching a controlled medication contract or if a provider deemed that they did not have the skill-set or resources to safely care for that patient), they may NOT re-open their chart with a new provider within the practice.

XI. Emergencies

If you have an emergency (such as an allergic reaction to medicine, suicidal thoughts with plan to act, or a suicide attempt) you must call 911 or go to your nearest emergency room. This is a requirement, as we are not available at all times and emergencies require immediate attention. After doing you may call your provider's emergency number and share it with any providers caring for you. Your provider will return the call as soon as is possible. **Emergency numbers for all providers are found here:**

<https://rittenhousepa.com/office-policies-and-fees/> and Emergency numbers are recorded on all providers' outgoing voicemails on their regular office lines. Please call 267-358-6155 and press your provider's extension as indicated in the directory to hear their outgoing message. We are not always immediately available even if you call these numbers (this is why you MUST call 911 or go to your nearest emergency room first). If you have any concerns about this policy, you are required to discuss with your provider (at the initial evaluation or if you develop concerns during your course of treatment). Our providers do not have admitting privileges at local hospitals, a 24/7 dedicated emergency line, or support staff answering phones during evenings, holidays and weekends. We have the resources to see patients with moderate levels of mental illness, and to be available within 48 business hours for patient needs. If a patient requires an inpatient psychiatric admission, has a suicide attempt, or an act of self-harm, this is typically an indication that they would benefit from a provider with additional emergency resources. If this occurs, patients will need to work with their treatment team (if inpatient) or utilize resources that their provider at RPA offers them, to find a new provider that is more appropriate for their care. Safety is extremely important to us, and it is incredibly important that we are transparent about our capabilities, resources and competencies, and only practice within them.