Appointment Cancellation, No-Show, and Late Arrival Policy

Impact Psychiatric Care’s policy requires patients call at least **24 hours** in advance of their appointment to avoid being charged a fee. If their appointment is on a Monday or following a long weekend, the cancellation should be made on the previous business day. Patients are expected to arrive on time for their scheduled appointments. Patients who arrive more than 10 minutes late, may not be seen, could be charged a fee and could be required to pay that fee before they can be rescheduled. IPC charges $50 for all late cancellations, no-shows, or late arrivals.

In order respect all patients’ time and schedules we try to remain on time for appointments. However, if there is an emergency in the office there could be a delay. Patients are required to arrive on time for their scheduled appointments and make every effort to have all intake forms complete in advance. Intake forms will be emailed 7 days prior to the appointment. If you do not have access to a computer to fill out our intake forms online, intake forms are made available in the office on a clip board in the waiting area prior to the appointment. Please arrive 10 minutes prior to your appointment to complete the necessary forms.

**Appointment Cancellations** – Must be cancelled 24 hours in advance. Failure could result in a $50 fee.

**No-Show** – No-Show appointments could result in a $50 fee.

**Late Arrivals** – Patients who arrive 10 minutes or later for their scheduled appointment are considered late arrivals and could be charged a $50 fee.

**Discharge Policy**

At the discretion of Impact Psychiatric Care, LLC a patient may be discharged from the Practice if any of the following guidelines are not followed and the patient’s insurance will be notified within 45 days:

- No show, late arrival or late cancellations for 3 or more appointments
- Patient fails to follow the recommended treatment plan or medical instructions including the Controlled Substance Agreement, if applicable
- Patient fails to meet financial responsibilities
- The provider cannot provide the level of care necessary to meet the patient’s needs
- The member and/or member’s family is abusive to the provider and/or staff in compliance with 42 CFR 438.56(a)(2)
- The provider moves out of the service area.

**By signing the Acknowledgement Agreement, you agree to and understand the Practice’s Cancellation, No-Show, Late Arrival, and Discharge Policy.**