

NHNP Policies 01/01/2024

Neighborhood NP, LLC - Practice Policies

Medication Refills - Please contact your pharmacy for all medication refill requests. Your pharmacy will fax or electronically request the refill on your behalf. Please allow up to 7 days for all requests to be processed before contacting the office.

Initials *

Outside Labs & Diagnostic Testing - When provided with an order for labs or diagnostic studies, the patient is responsible for communicating to Neighborhood NP when and where testing is completed in order for the provider to obtain test results for review. Do not assume testing is normal if we do not call or send you a message in the portal. If you do not hear from the provider within 7 days of notifying us of your test completion and location, please call the office or send your provider a message in the portal.

Initials *

Patient Billing - Invoices are sent via the patient portal and/or email. Invoices will be mailed only in special circumstances or if a balance is past due. Balances can be paid online with a credit card or sent to the mailing address provided. We reserve the right to decline further appointments if a patient has a past due balance.

Initials *

Credit Card on File: We are a small practice and depend on prompt payment. All patients are required to have a credit card on file. In the event a patient has a past due bill >60 days, we will notify the patient of this past due bill and charge the card on file for the past due balance.

Initials *

Out-of-Network Charges & Uninsured - We charge \$100 for visits up to 30 minutes in length. Each additional 15 minutes is \$50. Procedures and labs that are not covered by insurance may be additional, these will be discussed at the time of the visit.

Initials *

Means of Communication - The BEST way to communicate with your provider is via the patient portal - CharmPHR.com. Please allow up to 7 days for a response, but most messages will be answered within 48 hours. If you require attention within 24 hours, please text your name and contact number to 502-509-5223. Do not text personal information, we will call you for discussion. In case of emergency, please call 911 or visit your nearest emergency room.

Initials *

Homebound Patients - We DO NOT provide Primary Care to homebound patients. Our house call services in these situations are meant to be temporary in order for a patient to get prompt care or to "fill in the gap" while awaiting an appointment with primary care. We reserve the right to fill medications short term only, typically up to 1 month but always to the providers discretion. We hold the patient and or guardian responsible for ensuring that Primary Care services are being sought to take over care for the long-term.

Initials *

By signing, you as a patient agree to comply with the Practice Policies listed above and established by Neighborhood NP, LLC. You also agree to allow Neighborhood NP, LLC, to charge your credit card on file for any balances due and are posted >60 days.

First/Last Name of Patient/Guardian *

PATIENT/GUARDIAN SIGNATURE *
