

# Grey Matter Behavioral Wellness LLC

4600 Paradise Blvd. NW. # 67434.  
Albuquerque, NM. 87193  
505-433-4632

## Practice Policies & Procedures

If you are in a crisis situation or need immediate medical attention, PLEASE CALL 911 or go to your nearest emergency room.

New Mexico Crisis line 1-855-662-7474 available 24/7 | Or text "NAMI" to 741741 for 24/7, confidential, free crisis **counseling**.

### Who we are

We are a solo medical provider practice operated by Toyin Oladeji CNP (PMHNP-BC), a Psychiatric Mental Health Nurse Practitioner who is ANCC Board Certified. She is specialized in child, adolescent, adult, and geriatric psychiatry. Your behavioral health provider team will assess you and create a custom recovery plan that's right for you. We understand the importance of educating you on the most effective ways to take care of your soul, body and mind, so that you can heal and become the best YOU that you can be.

### What we offer

Comprehensive, collaborative, convenient mental health services that fit your schedule.

Not only will our providers treat your existing conditions, but we also work to maximize your prevention strategies. We strive to help you improve the quality of your mental wellness , achieve your wellness goals, and support your best possible life.

Our team will support you in building a healthier you. No matter what your health needs are, having team support will keep YOU on the path to meeting them. We work together to connect you with the services you need.

Set the conversation in motion by email, [greymatterbw@gmail.com](mailto:greymatterbw@gmail.com) call our helpline 505 433 4632 or schedule a Telehealth appointment online at the website [www.greymatterbw.com](http://www.greymatterbw.com)

## Confidentiality

The practice observes strict compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191. If we are legally obligated to report to authorities or to your referral sources, the most minimal information to achieve the goal is included in our report. As medical practitioners, we are mandated to notify the authorities if we suspect abuse or neglect of a child or compromised adult.

## Appointment Scheduling and Cancellations

The administrative staff will endeavor to reply to all communication within one business day. It is your responsibility to remember and keep your appointments. Not receiving a reminder phone call from us does not excuse you from your appointments. We require notification of at least one business day to cancel your appointment without incurring a fee. (Monday appointments may be canceled latest by the same scheduled time on the preceding Friday)

## Basic Fees

Initial evaluation with medication management 60 minutes	\$240		Rescheduling 2 full business days before appointment	No charge
Follow up with medication management 30 minutes	\$125		No show / Missed appointment	Full fee
Telephone calls under 5 minutes	Free		Cancellation less than 1 full business day/ 24 hours	50% of fee
Phone calls/10 min increments	\$30/10 mins		Returned check fee	\$35
Medical record copy search	\$20		Credit card transaction	+3%
<b>**Ask for fees of services not listed**</b>				

## Payment for Professional Services

Payment is required at each visit. This includes the deductible and copay portion of any insurance being used. Please be sure that we have the proper information. We will fill the medical

statement section and submit your claim. Any disputes between you and your insurance company is out of our consideration. You must understand that it is your responsibility to pay us for services received.

Delinquent accounts over 90 days may be turned over to collection agents. Future service requests may be declined if you have an outstanding balance.

## **Record review and copy**

You have a right to review your medical record or request a copy. Review will take place in person with the provider by appointment. Copy of your record may be requested by notification. Allow about 2 weeks for the record search. This incurs a \$20 fee. Copies are charged 50 cents/page printed.

## **Ethics and professional standards**

We are honored that you chose us for your mental health needs. We agree to abide by the highest ethical and professional standards and will make every effort to protect the welfare of those under our care. If you ever feel unhappy with our services, please do not hesitate to tell us in person or by writing. We will make every effort to work out a mutually agreeable solution. Should you feel the need to explore alternative services, we will provide appropriate referrals.

## **ACKNOWLEDGEMENT**

Please feel free to ask our staff any questions you may have about this document..

By my signature below, I attest that I have received and read the practice policies and procedures and agree to abide by it.

_____	_____	_____
Name	Signature	Date