
Attendance and Cancellation Policy:

***** READ this section carefully! Great Basin operates under full transparency and misunderstandings surrounding attendance and cancellation can be completely avoided! *****

Great Basin Behavioral Health values your time and we strive to be available for as many members of our community as possible.

In order to do this, we hold a high standard for our staff and our clientele as it relates to attendance and cancellations. Great Basin expects clientele to be present for services as agreed and in a timely manner. For treatment to move forward and be viable, consistent attendance is necessary and will be determined as part of the treatment planning process. Treatment and adherence is always “at will” and voluntary, however, effective treatment is at the discretion of each practitioner, and their treatment plan is expected to be followed accordingly in order to attain positive results.

***** A minimum notice of 36 hours is expected for ALL cancellations or rescheduled appointments*****

- Late Cancellations, defined as any cancellation that occurs **under 36 hours** prior to the beginning of a session and more than an hour prior, will be assessed a **\$65 fee (fee reduced for grad student interns/group)**
- A “Last Minute Cancel/No Show” is defined as **canceled a session within 60 minutes prior to a scheduled session** (e.g. not canceling by 1:00pm for a 2:00pm appointment) and when contact was not made with our office prior to the start time of the appointment. **There is a “Last Minute Cancel/No Show” fee of \$125 (fee reduced for grad student interns/group)**
- Excessive cancellation of a held weekly/biweekly spot, even if in advance of our 36-hour policy, may lead to termination of standing appointments (e.g. canceling 2 or more times for a weekly appointment in a 4-6 week period).
- After any of the following have occurred, your case will be staffed by our administration and/or treatment team and you may be terminated for services:
 - Two (2) concurrent weeks of either late cancellation or “Last Minute Cancel/No Show” appointments
 - Three (3) late cancellations or “Last Minute Cancel/No Show’s” in any 90-day period
- One (1) “No Show” or continual late cancellations may lead to removal from a standing appointment and appointments will be made on a week by week or cancellation basis only
- After a “No Show” appointment occurs and if you have not contacted our office within ten business days to reschedule, Great Basin will accept that as your notice that you have terminated services with our office.

When an appointment is scheduled with Great Basin, you are holding a time on a clinician’s calendar that cannot be used in treating another person. This is time reserved for you and it is expected this time will be well utilized. “No Shows” to appointments impact our ability to serve others well and will not be tolerated.

If/when a late cancel or no show is a possibility, we may be able to salvage your appointment via electronic means (e.g. video and/or phone) depending on individual circumstances. These options will generally be offered to you or you may request one of these options when your physical presence is not an option. At times, we may also be able to be flexible with some advance notice to move your appointment to a different time/date within the same week as a means to avoid this fee.

Often times, life interferes with your ability to present for a session you had previously scheduled. Understandably, this can be extremely frustrating and very inconvenient for yourself, your family and for your work. Though we fully understand that “life happens” and sometimes you simply cannot make it to an appointment for a variety of reasons, this does not change the fact that our professional staff held their time for you; time that cannot be used to help others and time that they rely

on financially to pay their own bills. Because of this, **we have a “no exceptions” rule** in regard to late cancelations and “no show” appointments, as **we only rely on the facts** in regard to attendance (just like reserving a hotel room; we hold an hour for you and you alone; if you are not present, we cannot fill that void, though, should still be compensated). **Find below examples of reasons we hear that DO NOT excuse you from our policy:**

- Being called in to work unexpectedly
- Yourself or a dependent being ill or losing daycare unexpectedly
- Transportation related problems, including flat tires and accidents
- Simply forgetting about your appointment or being double booked

Client Initials: _____ **Great Basin Staff Initials:** _____

A reminder contact will be sent by our automated system 1-2 days prior to appointments via email, text and/or phone and clientele are expected to be available for services when scheduled. This reminder is for your convenience only and should not be relied upon. **Late cancelations and “No Shows” are billed a fee of \$50 - \$100 (See above; \$25 for groups; a minimum of \$10 and up to \$50/full rate for grad student interns),** which will either be charged to a credit card on file or billed accordingly. **If a client presents more than 15 minutes late to services, the session may be considered canceled and billed the “No Show” rate specified above.** When this agreement is complete and on file prior to your initial appointment and you either late cancel or fail to present for services, you will be responsible for a late cancel or no-show fee.

***** The credit card will be input into our secure database and may be changed at any time*****

By signing below, I attest that I have provided a credit card or alternative form of payment and that I am authorized to use this form of payment at the time of initiation of services with Great Basin Behavioral Health. Further, I agree that this card may be used at the time of services and/or thereafter to pay for copays, co-insurance, deductibles, late cancelation and “no shows,” as well as fees associated with the services I have been offered or provided. I also agree to provide a new card if and when needed as a means of securing my appointments with Great Basin Behavioral Health and will inform Great Basin Behavioral Health staff if/when a replacement card may be needed to secure said services. **Further, I agree that I am fully aware of and understand the “no exceptions” policy in regard to the late cancelations and “no show” appointments. I also agree that I have been offered the opportunity to ask questions and be provided clarification surrounding this policy prior to initiating services with Great Basin Behavioral Health.**

Printed Name: _____ **Signature Date:** _____

The above policy was reviewed with the client verbally and I attest that the client was offered a satisfactory explanation of this policy and all questions were answered to the client’s satisfaction.

Signature (Great Basin Staff Member): _____ **Date:** _____