

# Office Policies

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**\*NOTE:** Please read this document in its entirety as some policies may have been updated recently.

**INTRODUCTION:** Welcome to Sim Family Clinic. Dr. Christopher S.C. Sim, M.D., Dr. William Chen, M.D., Dr. Alex Chen, M.D. and staff are committed to giving you quality medical care. We strive to make your visits to our office as comfortable as possible. Please let us know if there is anything that we can do to assist you.

**OFFICE HOURS:** Office hours are by appointment from 8:00am to 4:30pm Monday through Friday. We accept same-day appointments for more urgent medical care, however there may be a wait or may be scheduled for a later time if it is determined to be non-urgent.

## **AFTER HOURS**

If you have an emergency, go to the nearest Emergency Room/Urgent Care Center. Do not leave a voicemail message as no one will monitor the phone systems after hours. For non-urgent issues, call the office during business hours on the next business day.

## **APPOINTMENTS**

### **CANCELLATION POLICY:**

To enable a better selection of time and day, please call for appointments as early as possible. If you are unable to keep an appointment, please notify us **at least** 24 hours in advance **during business hours** to reschedule or cancel. (For Tuesday through Friday appointments, advise us before 2:00pm. For Monday appointments, advise us Friday before 10:00am.) You may call to cancel appointments, leave us a voicemail, or go online to the secure patient portal at <https://healthtracker.com> and cancel via the appointment request form. We reserve the right to charge a fee for not keeping your appointment or not following our cancellation policy.

We ask that new patients arrive 30 minutes prior to their scheduled appointment in order to fill out the necessary registration materials.

For our established patients, we ask that you please arrive 15 minutes prior to your appointment to prevent delays by taking care of payment and information updates.

### **LATE ARRIVALS FOR APPOINTMENTS:**

If you are late to your scheduled appointment, you may be asked to reschedule.

## **PAYMENT POLICIES**

### **INSURANCE/PAYMENT INFORMATION**

Payment for services should be made **upon check-in**. This includes copayments/deductible/coinsurance payments according to your health plan and any balances owed to the clinic.

We accept most major insurance plans, however it is suggested that you please verify with your insurance carrier that your doctor is participating.

Please confirm your health plan benefits (what is covered on your plan) before you receive treatment. Your health insurance plan does not pay for all of your health care costs. Be aware that any non-covered service that you decide to receive at the clinic is **your financial responsibility**.

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**PROVIDING UPDATED INFORMATION TO SUBMIT CLAIMS:** Our office will assist you in submitting your insurance claim. Please make sure to provide our staff with the most updated information upon making your appointment to prevent any delays. Inform us of any updates to your insurance information, address, and phone numbers over the phone. **If we are not provided with the current insurance information at the time of your visit and you request a claim to be resubmitted, there will be a charge of \$25.00 per date of service.**

Your insurance company may need you to supply certain information directly (for example, a questionnaire or coordination of benefits letter mailed or emailed to you). It is your responsibility to comply with their request. Please be aware that the balance of your claim is your responsibility whether or not your insurance company pays your claim. Your insurance benefit is a contract between you and your insurance company; we are not party to that contract. If your insurance company does not pay your claim in 45 days, the balance will automatically be billed to you.

**SELF-PAY/CASH:** For self-pay patients (meaning you do not have insurance coverage), we accept payment in cash and most major credit cards.

## **PERSONAL CHECKS:**

Personal checks will **ONLY** be accepted after the 3<sup>rd</sup> visit. We will not accept any checks after there has been a returned check on your account.

## **NONPAYMENT:**

If your account is over 90 days past due, you will receive a letter stating that you have 10 days to pay your account in full. Partial payments will not be accepted unless otherwise negotiated. Please be aware that if a balance remains unpaid, we may refer your account to a collection agency and you and your immediate family members may be discharged from this practice. If this is to occur, you will be notified by regular and certified mail that you have 30 days to find alternative medical care. During that 30-day period, our physicians will only be able to treat you on an emergency basis.

## **MINORS**

Patients/Guardian of a minor is responsible for providing insurance information and co pay/deductible/coinsurance at the time of visit. Our office will expect to collect payment from whoever brings the minor patient to the appointment and will not get involved in any custody/legal arrangements for payment of the visit. Minors must have signed authorization for medical treatment by parent/guardian on file if not accompanied by parent/guardian. The office requires that the minor patient is accompanied by a legal guardian/parent/authorized patient representative to the visit, unless otherwise specified by the terms of the Texas Family Code.

## **REQUESTS**

**LAB TESTS & X-RAYS:** A copy of your lab results are given to you at the time of your visit with the doctor. If you request additional copies of your results, there will be a fee. For all abnormal results, we will call you to make an appointment (if you have not set one up). Try not to be alarmed! Sometimes the doctor needs to see you to obtain more information, conduct further examination, or order more tests. No lab results will be given over the phone/fax/email.

**DISABILITY, FMLA, OR ANY OTHER FORMS, LETTERS, ADMINISTRATIVE REQUESTS:** There are fees to complete forms, letters, and other administrative requests as it takes staff and doctor time and expertise to review the records. We require advanced notice of 72 hours. Fees are dependent on the request. Please be aware that the clinic does not complete letters/forms for you to join a gym or weight loss program. Although the clinic supports all patients in leading a healthy lifestyle, we will not approve/sign consent for you to participate in a particular weight loss program/fitness center/gym.

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**COPYING OF RECORDS:** There will be a fee for copying of medical records, including for your lab/x-ray reports and account summary. The fee is dependent on the type of request. Check with the medical records staff.

## **MEDICATION REFILLS:**

Maintenance medications – please make sure that you have at least 2 weeks of medicine left and make an appointment to see the doctor when it comes time for your regular maintenance visit. **We do not accept medication refill requests over fax or phone.** In special circumstances, we may permit medication refill requests by phone; however we reserve the right to charge a fee per medication that must be prepaid before being called into your pharmacy.

**CONTROLLED SUBSTANCES/NARCOTICS:** Sim Family Clinic follows the state of Texas process when it comes to prescribing controlled substances/narcotics by accessing its online database prior to prescribing to ANYONE suspected of abuse to help protect the patients and the public. The doctors may also order random urine tests before prescribing these.

**NON-URGENT:** Voicemails, emails, phone messages for non-urgent situations will be answered accordingly within 72 hours. For voicemails, please speak loud and clear. Leave your name (spell it), date of birth, and phone number where you can be reached. Call-in if you are sick. Please do not leave messages.

## **REFERRAL TO SPECIALISTS:**

Urgent – We will process it the same day and will make the appointment on your behalf.

Routine – Allow 72 hours to process and let the referral coordinator know the doctor’s name, address, physician’s ID, and appointment date. There will be a charge for the time spent for getting a new one if you lose it or if you let it go past the approved dates.

## **RECEPTION AREA AND CLINIC COMFORT**

For the comfort of all our patients and to prevent disruption to office and equipment functioning, food/drink/tobacco products/music/cell phones are not permitted. You will not be permitted to enter the patient areas while using your cell phone. In addition, no treatment or service will be administered while the patient or patient representative (parent/guardian/authorized designee) is using a cell phone. You may be asked to leave the patient area and reschedule your appointment at a more convenient time. For adults with children, please bring only the patient. Please do not allow them to eat, drink, or go unsupervised. There will be a charge for damaging property in the clinic. If the behavior becomes disruptive, you may be asked to reschedule.