Robert C. Cantu Concussion Center
Emerson Hospital

Phone: (978) 287-8250 310 Baker Ave. Concord, MA 01742 Fax: (978) 287-8202

OFFICE POLICIES & PROCEDURES FOR PATIENTS

Appointments: Timeliness for your appointments is very important for the progression of your care; if you are late for your evaluation check-in time or are more than 10 minutes late for a follow-up visit, you will be rescheduled. We request a minimum 24-hour notification to cancel or reschedule an appointment. If you cannot make a scheduled appointment, please call our office as soon as possible. You will be charged a **$50 cancellation fee** if you cancel your appointment less than 24 hours in advance or if you do not show up for your appointment. For 2- and 4-hour neuropsychological testing appointments, a **$150 cancellation fee** will apply. If you do not provide us with the minimum 24-hour notice to cancel or reschedule an appointment on three or more occasions, any remaining appointments will be cancelled.

Insurance & Referrals: Referrals are an order from your primary care doctor that allows you to see a specialist or get certain medical services. You are responsible to know the details of your insurance coverage, which may include but is not limited to network status, copayments, deductibles, visit limitations, & referral requirements. **If at any time your insurance coverage changes, please notify the front office staff as soon as possible. This will ensure correct billing to your insurance company occurs.**

Co-payments: When applicable, copays will be collected prior to each office visit. We accept payments by cash, personal check, & credit card. If your insurance plan has a deductible or coinsurance obligation, you will be billed directly. Please verify your payment obligation with your insurance company.

Appointment Reminders: You will receive an automated reminder via phone call and/or text message prior to every appointment to remind them of their scheduled date & time. Please confirm with the front desk staff that we have the best contact phone number(s) on file.

Weather Policy: If there is inclement weather & we close the department, we will notify patients in a timely manner. If you are not able to make your scheduled appointment due to weather, please call the office to cancel your appointment. You will not be charged a fee for appointments cancelled due to inclement weather.

Medical Records: Per HIPAA guidelines, copies of medical records must be requested in writing. Should you or any other party require copies of documentation or treatment records, we kindly ask that you contact the Emerson Hospital Medical Records department by phone (978) 287-3907 or fax (978) 287-3652.

Documentation: Requests for the completion of forms or medical letters (e.g. workers' compensation, motor vehicle accident, work/school accommodations, medical leave) will be reviewed. Please allow 2 weeks for processing. If you need a prescription refilled, please notify us a week in advance to ensure it will be filled in time.

By signing below, I acknowledge that I have received, reviewed, understand, and will comply with the policies and procedures explained above.

Printed Name	Date Time
Signature of Patient or Legal Representative	Relation to Patient (if applicable)