



Soluna Holistic Healthcare, Inc. Financial and Office Policy

Please take the time to read the following and initial:

_____ 1) **Consent**- The patient or legal guardian consents to treatment and services provided during this or any future visits. This which may include but not limited to, laboratory procedures, examinations, treatments, procedures or other services rendered by the healthcare provider or their instruction.

_____ 2) **Late arrival**- If you are unable to arrive at your scheduled appointment time, please call the office immediately to inform the office staff. If you anticipate a more than 15 min arrival, your appointment may be rescheduled.

_____ 3) **Required payments**- your co-pay is due at the beginning of your appointment time and will not be billed.

_____ 4) **Appointment cancellation**- if you are unable to make your scheduled appointment, we ask that you cancel 24 hours in advanced. There is a **\$25 NO SHOW FEE** and will be required to be paid before your next scheduled appointment. Three missed appointments will result in termination of our relationship and assistance with transferring records to a new provider.

_____ 5) **Returned checks**- There will be a \$25 fee for returned checks and also Soluna will no longer accept a check but will accept cash, money order or certified check.

_____ 6) **Visit types**- Wellness appointments are essentially physical exams and do not generally include a complaint or medication refills. Insurance plans code each of these appointments differently and once the note is billed, you may be responsible for additional fees. Please clarify your appointment type when scheduling.

_____ 7) **Medication refills**- Please first utilize the patient portal. There is a link on the website. Secondly you may contact your insurance. Please allow 48 hours minimum for medication refills. Accuracy of medications are a priority.



_____ 8) **Chronic health management**- It is our expectation to see our chronic health patients every 90 days. Prescriptions will be written for 90 days and labs are to be completed. This is to ensure best patient care and management of complex disease processes.

_____ 9) **Referrals**- Please allow 3-5 business days for referral to be completed. We personally select a specialist for our patients and this is also dependent on insurance contracts as some require authorizations. If you have a previous specialist you'd like to be referred to, please bring the contact information to your appointment.

_____ 10) **Forms**- An appointment is required for forms to be filled out. This includes FMLA, travel documents etc. This is to ensure accuracy of the forms, dates and verbiage of the documents. A copy will be kept in the chart.

_____ 11) **Etiquette**- We at Soluna will provide excellent patient care and also treat you with respect. It is also our expectation that our patients are respectful. If at any time behavior is shown that is offensive or threatening, the provider/patient relationship will be terminated. Any grievance that a patient might have, we'd urge you to speak with us immediately.