



The Wellness and Prevention Center, LLC
19841 N. 27th Ave Suite 204
Phoenix, Arizona 85027
623-387-3705

Office Policies

1. We require a 24-hour notice for cancellation of appointments. This allows us to use our time more efficiently and book other patients who are in need. There will be a \$20.00 fee assessed for failure to provide this office with a minimum of a 24hr notice of cancellation.
2. Telephonic prescription refills are on an individual basis. We require a 48 hour notice for all prescription refill requests. Monitor your medications and refill needs carefully, do not allow your medication to “run out” in some instances going without your prescribed medications can be potentially harmful. All refills with the exception of controlled substances will be called to your local pharmacy. There may be instances when prescriptions are not refillable without an office visit. Please note we will NOT provide controlled substance refills without an office visit.
3. We will make every effort to provide walk-in or same day emergency service to established patients. However, we have limited emergency openings on a daily basis; these openings will be filled on a first come first serve and needs basis.
4. Medical record copy requests require a 5 day notice. In order to help defray the costs of copying we charge a minimal fee based on number of pages copied. Your fee will be collected at time of pick-up. If you request us to mail your medical records the cost of postage will be added to your total. Check or credit card payment will be required prior to mailing records.
5. Prior authorizations and non-urgent referrals may take up to 10 days. Same day referrals and retro authorizations are not guaranteed. Most HMO’s require a referral, once the initial request has been submitted by our office we must wait for the insurance decision. Should your prior authorization be denied we are happy to appeal the denial for you.
6. Walk in medical record requests, prescription refills and referrals are not accepted, please follow the appropriate process.
7. Any testing ordered by your provider will require a follow-up appointment. This allows you and the provider time needed to discuss results, develop a plan of treatment and ask questions related to your care. This also includes prescribed medications requiring monitoring.

8. Co-pays will be collected at the time of your visit. If you are not able to pay your co-pay at the time of service, we will be happy to reschedule your appointment. Co-pays are not billable.
9. Cash pay clients will be charged according to our service fee schedule. All service fees are collected at the time of service and are not billable.
10. We are happy to bill your insurance company for you with payment sent directly to this office. In the event your insurance company does not pay your visit related expenses we will bill you for the balance. Outstanding balances must be paid upon receipt of the bill. We will attempt to collect any outstanding balance at the time of your next scheduled visit. If your account is sent to a collection agency, interest and collection fees may be added to the balance due.

The staff of the Wellness & Prevention Center, LLC thank you for choosing us as your health care provider. We look forward to serving your health care needs.

I, _____, have read and understand the office policies.

(Patient/Guardian Signature)

(Date)