KOUBA DERMATOLOGY

Welcome to our practice!

We thank you for choosing our practice for your dermatology/dermatologic surgery needs and we are very much looking forward to meeting you!

Please complete your new patient forms and bring them with you on your appointment date. Please bring a list of your medications that includes strengths and directions. Our office hours are Monday through Thursday 7:30am-4:30pm.

Please arrive 15 minutes prior to your scheduled appointment time to allow adequate time for check-in and processing of paperwork. Patients arriving more than 10 minutes late may be required to reschedule their appointment.

Kouba Dermatology reserves appointment times specifically for each patient. Failure to provide proper notice of cancellation or failure to appear for a scheduled appointment limits access to care for other patients awaiting treatment.

A $50 no-show/late cancellation fee may be assessed for office visits canceled without at least 24 hours' notice or for missed appointments. Surgical appointments, Mohs procedures, cosmetic procedures, and other reserved procedural appointments may be subject to a $250 no-show or late cancellation fee if adequate notice is not provided.

Repeated missed appointments or late cancellations may result in dismissal from the practice.

Any disputes regarding no-show or late cancellation fees must be submitted to Kouba Dermatology in writing. Disputes will not be handled by phone or through front desk staff. All written disputes will be reviewed by practice management. If management elects to proceed with review of the dispute, the patient will receive a written response regarding the determination. Submission of a dispute does not guarantee reversal of the fee.

Cosmetic consultations and procedures may require a $100 deposit at the time of scheduling. This deposit will be applied toward the scheduled service. Deposits are non-refundable and may be forfeited in the event of a no-show, late cancellation, or failure to provide appropriate notice prior to the appointment. One rescheduled cosmetic appointment within a 12-month period may be permitted at the discretion of Kouba Dermatology.

Appointments will not be honored if arriving more than 10 minutes late and will have to be rescheduled.

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Please bring your insurance cards and a photo ID with you. These items are required in order for you to be seen. If you do not have these items, you will have to reschedule your appointment. Insurance co-payments are due the same day of service. If you do not have insurance, payments are expected at the time services are rendered. If you have questions, please contact our office to make prior arrangements.

If a referral is required for your insurance plan, it is your responsibility to have it either faxed to our office or brought with you at the time of your appointment. We cannot see you without a referral if one is required by your insurance company.

IN ADDITION PLEASE BE ADVISED:

- It is your responsibility to know your insurance plan, such as if pre-authorization or referral is needed, please bring this with you to your appointment. All insurances have different benefits, therefore we do not know if any or what procedures, labs or x-rays are covered benefits for you. IF you are unsure you will need to check with your insurance company or human resources department.
- We require a three (3) day notice for any and all prescriptions or refills, so please do not run completely out of your medication before calling for a refill. When you call to request a refill, please have the prescription information handy along with a phone number for your pharmacy. Our after-hours answering service is not for refills, and prescription requests WILL NOT be processed after office hours. If your medications are mail ordered, please request your refill well in advance of your medication running out.
- Our after-hours answering service is for emergencies only. Dr. Kouba requests that this line be kept open for emergencies. Any after hour non-emergency calls may be subject to an office fee.
- Please give a 24-hour notice if you are unable to keep your appointment as we have other patients waiting to be seen.
- We require a one week notice for all surgery cancellations as we have other patients waiting to be scheduled. You may be charged a fee if proper cancellation is not done in advance.

Again, we are looking forward to meeting you! If you have any questions or concerns don't hesitate to contact our office.

Thank you! Kouba Dermatology Team

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Patient Appointment, Financial, and Office Policy Acknowledgment

Please initial each section below indicating you have read and understand the policies outlined by Kouba Dermatology.

___ **Initials:** I understand that I am expected to provide at least 24 hours' notice for cancellation of scheduled office appointments and that failure to do so may result in a no-show or late cancellation fee.

___ **Initials:** I understand that surgical, Mohs and other procedural appointments reserve significant provider and staff time, and failure to provide appropriate cancellation notice may result in a $250 cancellation or no-show fee.

___ **Initials:** I understand that patients arriving more than 10 minutes late may be required to reschedule their appointment and may be subject to applicable cancellation fees.

___ **Initials:** I understand that co-payments, deductibles, balances, cosmetic deposits, and any non-covered services are my financial responsibility and are due at the time services are rendered unless prior arrangements have been made with the office.

___ **Initials:** I understand that prescription refill requests require up to three (3) business days to process and that after-hours calls are not intended for routine refill requests.

___ **Initials:** I understand that Kouba Dermatology's after-hours answering service is reserved for urgent medical concerns only and that non-emergent after-hours calls may be subject to an office fee.

___ **Initials:** I understand that cosmetic appointment deposits are non-refundable except as otherwise outlined in Kouba Dermatology's cosmetic scheduling policy.

___ **Initials:** I understand that any disputes regarding no-show or cancellation fees must be submitted to Kouba Dermatology in writing and will not be handled by phone or through front desk staff. I further understand that management will review written disputes and respond in writing if further review is deemed appropriate.

By signing below, I acknowledge that I have reviewed, understand, and agree to comply with the policies outlined above and, in the patient welcome materials provided by Kouba Dermatology.

Signature Date