

## NEW PATIENT INFORMATION

As part of providing you with the best possible mental health care, it is our desire that our office policies and practices be clear to you. Hopefully, the following information will clarify any questions or concerns you may have. If you have any questions, please feel free to ask our office personnel.

- Business office hours are from 8:00 a.m. to 5:00 p.m. Monday through Thursday, and from 8:00 a.m. to 12:00 p.m. on Fridays. No office personnel are available from 12:00 p.m. to 1:00 p.m. any weekday; however, during this hour an answering service will answer phone calls and take messages. For emergencies, there is a professional available 24 hours a day, 7 days a week. In case of an emergency, patients of Dr. Devers should call 772-8360.
- When you make an appointment, you will be given a written reminder of your appointment. In addition, you will be called the day before your appointment to remind you of the appointment. If you prefer not to be called, please let us know. If you are unable to keep your appointment, kindly give us 24 hours' notice; otherwise, a charge may be made for the time reserved.
- Because our office is not equipped to supervise young children while waiting for parents, we ask that you make arrangements for this situation to insure their safety.
- If possible, we confirm your insurance coverage prior to your first appointment. At that time your insurance company reads us a disclaimer, which basically states that they are not responsible for misquoted information that leads to nonpayment of claims. We, in turn, must extend that same disclaimer to you as we can only repeat what your insurance company quotes to us.
- As a courtesy to you we will file all charges on your behalf with up to two insurance companies. If you wish to file your own insurance, we will need payment in full at each visit. We will provide the super bill for you to file with your insurance company.
- Insurance is a contract between you and your insurance company. Therefore, we will not become involved in disputes between you and your insurance company regarding deductibles, co-payments, covered charges, secondary insurance, "usual & customary" charges, etc., other than to supply factual information as necessary.
- You are ultimately responsible for the timely payment on your account. We ask that you pay the co-payment at the time of each visit. Should you have a question about your account, please contact our business office. We are here to assist you in any way that we can.

I have read and understand this information and do hereby consent to treatment on behalf of my child or myself.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Patient, Parent, or Legal Guardian)