

Pediatric Specialists of Texas | Welcome to our Practice!

Patients are the most important people in our office and we are committed to providing the best possible care. Excellence is our goal. Please do not hesitate to ask us any questions about your health plan or medical care.

PHONES: Telephones are answered Monday–Friday, 8:30am–5:00pm, except during lunch from 12pm-1pm (answering service)

OFFICE HOURS: Monday–Friday, 8:30am–5:00pm

EMERGENCIES: For life-threatening situations, call 911. If you have an urgent problem, please call our office for instructions. After hours, our answering service will advise you how to reach a physician on call.

PRESCRIPTIONS: Please evaluate your supply of medications prior to your visit so we can arrange refills at that time. If you require refills between visits, please request them through our Patient Portal or call your pharmacy who will submit the request to us electronically. We process refill requests only during normal business hours and require a 72-hour turnaround.

SCHEDULING: To make an appointment, please call (210) 575-6240.

Please call in advance to schedule a routine office visit and make follow-up appointments before you leave. We make every effort to stay on schedule, although emergencies arise. If we are seriously delayed, we will attempt to notify you beforehand.

LATE ARRIVAL: As a courtesy to other patients and staff, please call our office as soon as possible if you are going to be late. If you are more than **15 minutes late** for your scheduled appointment, you will be seen at the discretion of your physician. If it is determined that the physician cannot fit you in, then you will need to reschedule your appointment. Patients arriving late may have to wait to be seen so we can accommodate other scheduled patients who arrived on time.

EARLY ARRIVAL: New patients are asked to arrive 30 minutes before their scheduled appointment time. For follow-up visits, please arrive 15 minutes before your scheduled appointment time. If you arrive earlier than that for your appointment, you will still be seen at your scheduled appointment time.

CANCELLATIONS and FAILURE TO SHOW UP/NO-SHOW: Our practice requires 24 hours' notice prior to cancelling or rescheduling an appointment. Repeated cancellations/rescheduled appointments, same-day cancellations, or no-shows may result in your discharge from the practice.

INSURANCE and PAYMENTS:

- Prior to your appointment, please check your insurance information and be sure you understand their requirements regarding referrals, co-payments and any deductible to be paid at the time of the visit. We accept cash, checks and credit cards (Visa, MasterCard, Discover and American Express).
- Personal checks that are returned for non-payment (non-sufficient funds/NSF) will result in a returned check fee to be assessed to your account. You may also be required to provide alternative payment methods for all future visits.
- Please bring your insurance card to every visit and arrive early (30 min. for new patients; 15 min. for follow-up visits) to complete the necessary patient information forms.
- We accept Medicaid as well as most insurance plans. However, please review all insurance information with our staff prior to services being rendered.
- Your health insurance policy is a contract between you and your insurance company. Any complaints regarding your coverage should be directed to your insurance carrier.
- Referrals: If you are being referred to our practice, your referring physician should submit referrals and insurance authorizations to our office prior to your appointment. If these are not received, your insurance claim may be denied and any service we provide will be your financial responsibility.

WHAT DO WE NEED FROM YOU?

- Inform the office staff of any changes in insurance, employment, personal information or relationships with other care/service providers.
- Arrive on time for scheduled appointments and cancel, when necessary, with a phone call.
- Provide payment for services requested and delivered by Pediatric Specialists of Texas not covered by insurance within 90 days.
- Notify Pediatric Specialists of Texas of any change in the patient’s health status.
- Follow the recommended treatment plan and inform Pediatric Specialists of Texas of any physical or mental impairment requiring special accommodation.
- Ask questions if directions and procedures are not understood.

WHAT SHOULD YOU EXPECT FROM US?

- To be treated with respect, dignity and be informed of care and treatment options to make appropriate decisions.
- To expect that teaching materials will be provided in a manner you can understand.
- To be informed of Pediatric Specialists of Texas’ billing process.
- To have your records kept confidential except when consent has been given in writing.
- To expect services to be professional, timely and appropriate.
- To communicate your concerns to the Pediatric Specialists of Texas Practice Manager and expect to receive timely follow-up without negative repercussions or changes in service.
- To receive care without discrimination due to race, religion, age, sex, disability or ethnic origin.

I have read, understand and agree to the office policies outlined in this Welcome notice.

Printed Name of Patient, Parent or Legal Guardian

Patient Name

Signature of Patient, Parent or Legal Guardian

Date