
UPDATED OFFICE POLICY CONTRACT

Updated December 2023

Dear Patient:

We have updated our Office Policies and Fee Schedule. Please *carefully* read through the following and initial and sign where indicated.

Please note our Convenience Fee Policy. We deeply care about our 1,000+ patients and hope that these changes will help us continue to provide exceptional care to everyone. We value you as our patient and look forward to continuing to serve you in your journey towards wellness.

Thank you,

Todd Mangum, M.D., P.C.

EMERGENCY COVERAGE: IN CASE OF AN EMERGENCY, DIAL 911 OR GO TO YOUR LOCAL HOSPITAL EMERGENCY ROOM OR THE CRISIS UNIT OF YOUR LOCAL MENTAL HEALTH CENTER. Please be advised, our office does NOT handle urgent or emergency care and we do not check messages after hours or on weekends.

For these and other reasons we highly encourage all patients to maintain care with a Primary Care Provider.

PATIENT INITIALS: _____

INSURANCE COVERAGE: DR. MANGUM IS NOT A LISTED PROVIDER WITH ANY INSURANCE COMPANY.

Some insurance companies, however, do cover our services as an Out-of-Network provider. We will generate a "Super Bill" receipt at the end of your visit, which you can send to your insurance company for possible reimbursement. This Super Bill can also be kept as proof of services for those who pay with an HSA and for those who keep track of their medical expenses for tax purposes.

IF YOU HAVE INSURANCE COVERAGE your first step is to determine whether your plan has any Out-of-Network benefits. If you are uncertain, we strongly advise you to call your insurance company prior to your visit to find out more. When you call your insurance company please tell them the following:

- (1) You are coming in for a Comprehensive First Visit
- (2) Dr. Mangum is an OUT-OF-NETWORK provider
- (3) The billing code for the standard 90-minute visit is 99204

As a courtesy, our office provides copies of the patient check-out sheet, lab results and Super Bill when you check out. Please create a file and keep track of all these copies from our office as there will be a charge for duplicates. Remember, your insurance coverage is a contract between you and your insurance carrier. If your insurance company requests additional information from our office to process your claim you will be responsible for additional fees. The cost for both processing the insurance claims and creating duplicates will be dependent upon the time required as per our Convenience Fees (see below).

MEDICARE OR MEDICAID: Dr. Mangum is NOT a provider for Medicare or Medicaid; therefore, you cannot submit a Super Bill to them or to your supplemental insurance if you have one. Medicare and Medicaid, however, often cover some blood work and other labs ordered by our office. Medicare/Medicaid patients must sign the Medicare Opt Out Private Contract form in addition to this contract.

PATIENT INITIALS: _____

PHONE MESSAGE POLICY: It may take 72 business hours for us to get back to you. Please do NOT leave multiple messages. Multiple messages delay our ability to promptly respond.

FEES MAY CHANGE WITHOUT NOTICE

FEES AND BILLING: OUR PAYMENT POLICY IS FEE-FOR-SERVICE.

- For new patients payment is due at the time of booking.
- For established patients payment is due at the time of service.

FEE SCHEDULE	LENGTH OF VISIT	COST
New Patient Comprehensive Consultation	90 minutes	\$475
Comprehensive Follow Up Consultation	31-45 minutes	\$215
Follow-Up Consultation	16-30 minutes	\$165
Follow-Up Consultation	11-15 minutes	\$115
Extended Comprehensive Follow-up	46-60 minutes	\$265
Extended Comprehensive Follow-up	61-75 minutes	\$315
Extended Comprehensive Follow-up	76-90 minutes	\$365

If you are scheduled for a 45-minute follow-up appointment, but only use 15 or 30 minutes, you will be charged according to the fee schedule above. The converse is also true. If the doctor spends additional time working on your file you will be charged accordingly.

NOTE: A credit card is required at the time an appointment is made. This card will be charged for missed appointments based on our Cancellation & Late Arrival Policy (see below).

CANCELLATION & LATE ARRIVAL POLICY: Please be aware, Dr. Mangum does not overbook appointments. We require ample notification when rescheduling or canceling an appointment. Your initials and signature below indicate your acknowledgement and acceptance of our Cancellation & Late Arrival Policy.

PLEASE BE ADVISED:

“Sufficient Notice” of appointment cancellation is 24 hours or more before appointment time = NO charge.

Cancellation less than 24 hours and “NO SHOW’s” will be billed 100%.

Patients arriving 15 minutes or later, to their appointment, will be considered a “NO SHOW” and billed at 100%.

The 15-minute rule applies to phone appointments.

The 15-minute rule applies even if you call to let the office know you are running late.

It is not possible for the doctor to cover everything required in a shortened appointment.

OUR CANCELLATION & LATE ARRIVAL POLICY APPLIES TO ALL PATIENTS, INCLUDING FIRST TIME PATIENT VISITS.

This Policy applies regardless of the reason for your cancellation.

PATIENT INITIALS: _____

ADDITIONAL COSTS: Additional costs may include recommended supplements, lab fees if choosing the pre-pay option and any lab tests that will be paid for at the time they are completed such as: specialized blood tests, saliva, stool, urine or hair analysis. These items are not typically reimbursed by insurance, but an HSA or flex-spending account may be used to cover these expenses.

PHONE APPOINTMENTS: Phone appointments are available for follow-up consultations. Phone appointments are made like regular appointments and will be billed at the same fee schedule as above. For phone appointments, we will call you at your scheduled appointment time. NOTE: You will need to provide a credit card number prior to your phone appointment, which will be charged following your appointment. Our Cancellation & Late Policy applies to phone appointments as well.

CONVENIENCE FEES: These fees apply whenever a patient; calls, emails or shows up at the office with a question or request outside of a scheduled appointment. The costs range from \$40 on up depending on the time required to fulfill the request. If the request requires more than 15 minutes you will likely be encouraged to schedule an appointment. The fee covers the time required by the doctor and staff to review charts or records, make an assessment, answer questions, complete forms, change a prescription, etc.

CONFIDENTIALITY: Professional ethics as well as the laws of the State of Utah (as well as other States) require that we honor your right to privacy and the confidentiality of our work together. We will not provide information about you to others without your informed consent and written permission. We are, however, required by law, to report clear and present danger to human life and any form of child abuse. You will be given a HIPPA form that must also be signed.

I have read the above and agree to follow the parameters of this contract.

Patient Signature: _____ Date: _____

WEB OF LIFE WITNESS SIGNATURE: _____ Date: _____