



1031 WEST WILLIAMS STREET, SUITE 102, APEX, NC 27502

PHONE (919) 439-7867 FAX (919) 573-9594

NO SHOW/LATE CANCELLATION POLICY

- We charge a \$250 NO SHOW fee for new patient appointments.
- We charge a \$100 NO SHOW fee for follow-up appointments.
- We charge a \$150 NO SHOW fee for procedures.
- We require a 24 hour notice of a cancellation.
- Less than 24 hour notice is equivalent to a NO SHOW FEE.
- If a patient is more than 30 minutes LATE for an appointment they will be charged a NO SHOW FEE and need to reschedule. No prescriptions will be given.
- These fees cannot be billed to the insurance company and are the responsibility of the patient.
- Fees will be collected at the time of next appointment in addition to their usual copay and balance. If the patient does not return to the practice, the remaining balance will be billed by the billing department.
- If a NO SHOW FEE is not paid within 60 (sixty) days, the patient will be charged an additional \$10 late payment fee.
- Fees may be waived on a case by case basis ONLY in the event of an emergency or death in the family. Documentation may be requested.