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4025 Jackie Road SE: Rio Rancho, New Mexico 87124
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Patient Timely Arrival & Notice Policy

Statement

As a courtesy to our patients, we make every effort to prepare for a patient's examination. Our administrative team will reserve the appointment time, prepare previous examination records, and send a reminder by email, text message, or phone call to confirm the appointment. Our billing department will research and verify insurance information to insure coverage for the examination. Our billing department will do their best to contact patients by phone well in advance of the appointment to inform of any concerns. Lastly, our doctors will review patient history before their arrival at our office.

We recommend all patients check in 10-15 minutes early to their scheduled appointment to get checked in, complete paperwork, and complete technician preliminary testing.

Late Arrivals

City of Vision Eye Care is unable to guarantee an appointment slot if a patient arrives late. Late arrivals may be seen based on the same-day availability of providers on staff. It is the patient's responsibility to call our office as soon as possible to see if we can accommodate a late arrival.

Cancellations

If a reserved appointment cannot be kept, it is the patient responsibility to cancel the appointment at least 24 hours in advance. If cancellations are made within 24 hours of the appointment reservation, there may be a delay before another appointment slot may be available.

Missed Appointments

If a patient makes an appointment and does not show or contact the office to inform us of the situation, the appointment will be noted as missed. Missed appointments produce an undue burden to our staff, administrators, doctors, and other patients looking for a popular appointment slots. As a result, City of Vision Eye Care maintains a 3-strikes policy on missed appointments.

3-Strikes Policy

1st No Show – No warning.

2nd No Show – Verbal or written warning given.

3rd No Show – Patient account is reviewed for restriction to same-day-only appointments.

No show violations are active for 12-months and considered forgiven after a 12-month period.

Effective Date: 07/18/2017

Last Update: 07/14/2017



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Staff Procedure

Flag appointment in Crystal

- Cancelled Flag – If a patient calls within 24 hours of their exam to cancel or reschedule, please make note of the call in the patient screen > Notes > Correspondence and record the reason for their cancellation. If the staff feels that the excuse is genuinely out of the patient’s control (illness, car issues, family emergency, etc.) then the appointment will be marked as “cancelled.”
 - Last minute cancellations must be due to extenuating circumstances.
- Missed Flag– If a patient does not show for their exam or cancels within 24 hours with non-extenuating circumstances, the appointment is marked as “missed”.
 - **Patients are allowed 2 missed/cancelled appointments over 12 months before being given a verbal/written warning. After a 3rd missed/cancelled appointment the account must be forwarded to management review for possible restriction or termination.**

Same Day Only Appointment Restriction

If a patient calls to schedule and has a “Same Day Appointment Only” restriction flag, it means they have been warned and continued to violate our appointment policy.

- DO schedule them an appointment into an open slot the same day if they call that morning to check for open slots.
- DO NOT reserve an appointment slot for any day other than the one they are calling on.
- DO NOT overbook them into a full schedule. Overbooking must always be reserved for emergencies only and must be authorized by the doctor being overbooked.
- DO NOT place restrictions on patient accounts without management knowledge & approval.
- If a patient misses an appointment they made that same day, notify management to consider for termination.

Note

It is the responsibility of all staff members to forward all patient accounts that qualify for restriction to management for review. Upon a thorough account review, the account will be updated to reflect management’s decision concerning the account. Staff members are permitted to give verbal warnings to the patient (if appropriate) when the patient reschedules informing the patient that they will face management review if the patient misses their next appointment. **Such a warning must be noted in the record. Staff may not place any restrictions a patient’s account without management review.**

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Management Procedure

1. Review Chart and CrystalPM to update any unconfirmed/confirmed status appointments to "signed-out" or "missed".
 - a. Print appointments list & highlight missed/cancelled exams
2. Review pink sheets & CrystalPM notes for extenuating circumstances that may excuse the patient behavior.
 - a. Verify that patient was appropriately warned. If they were not, it is at management discretion if the patient needs to be warned or immediately restricted.
3. Restriction Procedure
4. Complete & print Patient Restriction Letter Template
5. Print standard letter inserts
 - a. Outside Providers List
 - b. Records Release Form
 - c. Timely Arrival Policy
6. Forward packet to Dr. Reynolds to review, approve, sign, & return.
7. Maintain letter copy in chart
8. Mail/email/fax letter packet
9. Create Alert on CrystalPM Patient account that patient has been placed on restriction for the duration of 12 months from the 1st violation date.

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[WARNING LETTER TEMPLATE]

[DATE]

[PATIENT FIRST NAME LAST NAME]
[PATIENT ADDRESS]
[PATIENT ADDRESS]
Phone: [PATIENT CONTACT]
Date of Birth: [DOB]

Dear [PATIENT NAME],

You have missed [# of appointments] of your scheduled appointments with our office this year. While we strive to be as understanding as possible when you miss your appointments, we must do our best to reserve our appointment slots for patients who can keep them. Attached is a copy of our office appointment policy for your review.

We are willing to re-schedule your appointment one more time this year, but if you are unable to make that appointment, we will no longer be able to reserve appointments with our doctors for you.

We understand that you have many choices in eye care providers. Attached is a list of eye care locations nearby that may have appointments that are more convenient for your busy schedule. If you would like us to send your most recent examination chart to one of them, please fill out and return the included records release form.

Thank you.

Dr. Dean Reynolds OD
City of Vision Eye Care Practice Owner



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[SAME-DAY-RESTRICTION LETTER TEMPLATE]

[DATE]

[PATIENT FIRST NAME LAST NAME]

[PATIENT ADDRESS]

[PATIENT ADDRESS]

Phone: [PATIENT CONTACT]

Date of Birth: [DOB]

Dear [PATIENT NAME],

You have missed **[# of appointments]** of your scheduled appointments with our office this year. While we strive to be as understanding as possible when you miss your appointments, we must do our best to reserve our appointment slots for patients who can keep them. Attached is a copy of our office appointment policy for your review.

You were sent a warning letter on **[DATE OF LETTER]** and was rescheduled for an appointment. Unfortunately, you were unable to keep that appointment and we can no longer make appointments in advance for you. If you require routine or emergency eye care services, we would be happy to provide services for you on a same-day-appointment only basis. Please feel free to give us a call during office hours to check our same day availabilities.

We understand that you have many choices in eye care providers. Attached is a list of eye care locations nearby that may have appointments that are more convenient for your busy schedule. If you would like us to send your most recent examination chart to one of them, please fill out and return the included records release form.

Thank you.

Dr. Dean Reynolds OD
City of Vision Eye Care Practice Owner

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[TERMINATION LETTER TEMPLATE]

[DATE]

[PATIENT FIRST NAME LAST NAME]

[PATIENT ADDRESS]

[PATIENT ADDRESS]

Phone: [PATIENT CONTACT]

Date of Birth: [DOB]

Dear [PATIENT NAME],

You have missed [# of appointments] of your scheduled appointments with our office this year. While we strive to be as understanding as possible when you miss your appointments, we must do our best to reserve our appointment slots for patients who can keep them. Attached is a copy of our office appointment policy for your review.

You were sent a warning letter on [DATE OF LETTER] and was rescheduled for an appointment. Unfortunately, you were unable to keep that appointment and we can no longer make appointments in advance for you. If you require emergency eye care services, we would be happy to provide services for you on a same-day-appointment-only basis for the next 30 days while you establish eye care with a new provider.

Attached is a list of eye care locations nearby that may have appointments that are more convenient for your busy schedule. If you would like us to send your most recent examination chart to one of them, please fill out and return the included records release form.

Thank you.

Dr. Dean Reynolds OD
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