



**CONFIDENTIAL**

Still Waters Mental Health Services, LLC  
Bradley J. Shaw, CRNP, FNP-C, PMHNP-BC  
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## Patient Policy Agreement

**Please read each section carefully. Sign and date at the bottom.**

**If you would like to review these policies again, please visit: [www.stillwatersmh.com](http://www.stillwatersmh.com)**

### **Insurance**

We bill participating insurance companies as a courtesy to you. Services are provided with the understanding that you (not an insurance company) are ultimately responsible for the cost of the services that you are scheduling. Insurance plans vary and not all services may be covered. You are responsible for knowing what services are covered by your particular plan, please check with your plan by calling the number on the back of your card before your appointment. If you need a prior authorization for services, this must be completed before you are scheduled. If you fail to obtain authorization, any and all charges incurred and not reimbursed, will be your financial responsibility.

If your insurance does not pay your claim within 60 days, it will be your responsibility to contact them to resolve any issues of coverage or coordination of co-coverage. If you have a change in your insurance, it is your responsibility to notify the office as soon as possible to ensure that the correct company is being billed and that your account does not become past due.

### **Payment**

Payment for deductibles, co-pays, coinsurance, uncovered services, or any balance due on your account are to be paid at the time of your – or your child’s – appointment. The person signing below is the account guarantor and is accepting responsibility to pay for services rendered. This includes those provided to a child - regardless of custodial or legal agreements between parents. Please come, or send your child, prepared to do so. If you are not in a financial position to pay at the time of the appointment, we will be happy to reschedule the appointment for a more convenient time.

Outstanding balances of greater than \$100 and/or more than 60 days must be paid in full or a payment plan set up and adhered to before any new appointments will be made or refills for medications given. After 90 days, we reserve the right to send your bill to collections if no prior agreement has been made. If your balance has been sent to collections, you will be responsible for all additional collections fees, insurance will not cover these fees.

### **Late Cancellations / No Shows**

If you arrive more than 10 minutes late to an appointment, it will be considered a late cancellation / missed appointment and you may be rescheduled for another time. If you need to cancel an upcoming appointment for any reason, please allow at least 24-hour’s notice, not including weekends and holidays. The late cancellation / no show fee for a missed follow-up appointment is \$50, and for a missed intake appointment is \$75. Please note: insurance will not cover missed appointment / no show fees. This fee must be paid before your next appointment can be scheduled.

If you fail to show to a scheduled appointment and do not call within 30 days to reschedule, you will be considered to have terminated treatment with Still Waters Mental Health Services, LLC. All patients must be seen at least one time every 3 months. If a required follow up is not made at the three-month period you will no longer be considered an active patient of Still Waters Mental Health Services, LLC (Bradley J. Shaw, CRNP) and we will no longer accept responsibility for your care.

**Medication Refills**

Medication refills are done during appointment time only so that your response to the medication(s) can be properly assessed. Prescriptions will be written with enough refills to last until your next appointment. We recommend scheduling your next appointment at the end of each session so that we can be sure you are following your treatment plan and also so you do not run out of medication.

These strict policies primarily reflect my concern for my clients' well-being. Self-assessment of psychiatric symptoms can be difficult and requires quite a bit of practice and feedback, especially early in treatment. We recommend scheduling your next appointment at the end of each follow-up appointment as our schedule fills up quickly.

If something unexpected occurs and you run out of medication before your next scheduled follow-up, please call or message our office ASAP to request a refill. Do not contact the pharmacy as this can cause delays. Please allow up to 5 business days for the refill to be approved by insurance, if appropriate. Controlled substances cannot be refilled without an appointment.

**Controlled Substances**

Controlled substances such as benzodiazepines and stimulants are highly regulated by the DEA. These medications can be very useful when indicated, but require more monitoring and must be part of a comprehensive treatment plan. Patients who are prescribed controlled substances must be seen at minimum once every 3 months. If you do not adhere to the agreed upon treatment plan, then I will be unable to continue to provide care to you. **There will be no early refills of controlled substances for any reason.** If you no show or late cancel for your scheduled appointment and request a refill of these medications, you will not receive a refill until you are seen.

**Court Evaluations and Legal Matters**

Still Waters Mental Health Services, LLC does not provide court evaluations or court testimony and is not a Forensic Psychiatry office. Forensic (court) work and forensic psychiatry is a specialty that we are not trained in and we are happy to refer you to someone who does this type of therapy.

If we are ordered to testify in proceedings, it seriously undermines our therapeutic practitioner-patient relationship, is very disruptive to the office routine, and is unfair to our other patients. Please inform us immediately if you are involved in, or plan to go to court.

We accept clients only with the specific agreement that that they will not involve Bradley J. Shaw, CRNP, FNP-C, PMHNP-BC or Still Waters Mental Health Services, LLC in any legal matters, including but not limited to child custody, court-ordered treatment, worker's compensation claims, and criminal cases. We do not provide legal opinions, evaluation, nor testify for disability or child custody cases.

By signing below, I acknowledge I have read and understand Still Water Mental Health Services, LLC Patient Policy Agreement.

Patient name: \_\_\_\_\_ Date \_\_\_\_\_

Patient or Guarantor signature \_\_\_\_\_ Date \_\_\_\_\_