



Center for Adult & Geriatric Psychiatry

2002 Richard Jones Rd
Suite C 206
Nashville, TN 37215
Phone: 615-383-0055

111 Highway 70 East
East Pavilion, 2nd Floor MH2-227
Dickson, TN 37055
Phone: 615-383-0055

www.DrRajPsychiatry.com

Dear Patient,

Welcome to our office. It is to your benefit to **Contact Your Insurance Company** about your "Mental Health Coverage" They will inform you of your Deductible, co-payment and Pre **Certification, if necessary. This is important, as Mental Health Benefit May Be Different From Medical Benefits. Please Bring Your Insurance Card,** as we need a copy in order to file insurance claims behalf.

Please **BE ON TIME**. We have **24 hour Cancellation Policy**. If you do not Cancel 24 Hours in advance , you will be charged a **"No Show Charge"**, as Doctor has lost the time that could have been spent with another patient **(No Show Charge Is Equivalent to charge for visit you were scheduled for) Insurance Will Not Pay For this charge. You will be responsible.**

Medicare has different level of coverage for mental health. Dr. Rajpura does not accept TN CARE in his office setting. You will be responsible for your portion of Medicare/Medicaid non cover charges, including No Show Charges.

Deductibles and Co Payment are Expected at Each Office Visit.

We will file insurance claims on your behalf. Your insurance company may only pay portion of these charges and you will be responsible for reminder as allowed by insurance company. **All outstanding balance are expected to be paid at the time of service.**

If you need refill on your medication, please have pharmacy call us. **If written prescription is mailed , there will be \$25.00 charge to the patient.** If you need a mail order prescription (90 day) please let us know at the time of your visit. **Refills will not be authorized over the weekend. Controlled medication (such as sleep medications or medications with high abuse potential) will not be called in or faxed to pharmacy. It will be written prescription and only be handed to patient or authorized representative.**

Repeated **and Extended telephone consultation will result in consultation charge at the rate of \$ 50.00/15 minute segment.**

If you have request for specific appointment time, please let secretary know.

Thank you for your cooperation.

Bhupendra M. Rajpura, MD