

# *Linda Kellams-Keith, ARNP*

## **PSYCHIATRIC SERVICES OF OLYMPIA, PLLC**

1005 Olympia Ave NE, Olympia Wa 98506 Telephone: 360.709.3332 Fax: 360.709.3336

### **OFFICE POLICIES**

Welcome to the Psychiatric Services of Olympia, the office of Linda Kellams-Keith, Psychiatric Nurse Practitioner. Please review this document as it outlines the policies and procedures of this practice. I believe that it is important for your treatment, and to avoid any future misunderstandings to have my office policies in writing. If you have any questions, please let me know.

#### **PRIVACY**

Psychiatric Services of Olympia is in compliance with Federal Privacy regulations. This means that we will not let anyone know that you are, or have been a patient here unless you give us written permission to do so. Exceptions would include family members who are present during your appointments and other health providers involved in your care, or if you tell us that you or someone you know are abusing a child or an elderly person, or that you intend to harm yourself or another person.

#### **APPOINTMENTS / CANCELLATIONS / NO SHOW POLICY**

Appointments may be made in person, by phone or by email. You may leave a message at (360) 709-3332 or send an email to [TeriPsychSerOlyARNP@gmail.com](mailto:TeriPsychSerOlyARNP@gmail.com).

Keeping your scheduled appointments is **critical** to your care and to the operation of our office. Please take a few minutes to review our no show policy. A definition of a "No Show" appointment is when (1) you do not arrive to the appointment; (2) you cancel with less than 24-hours notice; (3) you arrive more than 10 minutes late for a scheduled appointment.

No show appointments or late cancellations will be charged at \$100.00 per occurrence. Insurance companies will not pay for these charges and this fee must be paid before you reschedule. If you No Show or Late Cancel for more than two appointments within a calendar year, your treatment at our office, may be terminated.

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## **PRESCRIPTIONS**

If medications are recommended for you, they will be discussed during the time of your appointment, and either sent to your pharmacy electronically, or given to you in written form. Medication changes will not be made by phone or by email. If you need prescription refills outside of your appointment, please ask your pharmacy to fax the request to (360) 709-3336. Please allow at least 72 hours for your medications to be authorized by our office. If you are prescribed a controlled substance, a written prescription may be required. **If you have not been seen recently, an office visit may be required before a prescription can be given.** If you No Show for an appointment, or Late Cancel an appointment and then ask for refills, a \$50.00 fee will be charged.

In most cases, office visits are most frequent during the initiation of treatment. The time between appointments may increase as improvement in symptoms is achieved; however, it is my treatment philosophy and standard of care to see all patients, for whom I prescribe medications, at a minimum of every 90 days.

## **BILLING AND FEES FOR SERVICES**

We are able to bill insurance companies as a courtesy as long as I am a contracted provider; however, it is your responsibility to check your benefits and coverage with your insurance company to be sure services are covered. **Please keep us updated on any changes in your insurance carrier or plan, and/or address changes.**

If you have a co-pay or co-insurance, it is due at the time of service.

If you do not have insurance there is a reduced cash fee for appointments. This cash fee is due at the time of service.

Please keep your account up to date and paid. **If your account balance becomes 60 days or more past due, your treatment here may be terminated, and your account sent to collections. We will not be able to schedule appointments or fill prescriptions until our billing department has cleared your account.**

If you have questions about your account or any other billing questions, please contact my billing company, Linda Kenyon/Northwest Clinical Billing, at (360) 491-8002.

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**PHONE CALLS**

Office hours and phone coverage may fluctuate, so if no one is in the office to answer your call please leave a message. We try to return all calls within two business days.

Care is best provided face to face during scheduled appointments, but please call or email if you are experiencing a medication problem or side effect. If more than a brief recommendation is needed, an office visit may be required.

For excessive phone calls outside of your office visits, **there will be a fee.** Please note that insurance companies will not cover fees for phone calls.

**EMERGENCIES**

If you are experiencing a life-threatening emergency, either medical or psychiatric, please call 911 or go to the nearest emergency room. During business hours if you have a question please call the office and leave a message. If your call is urgent and it is after hours, my voice mail will give instructions on how to get in touch with me. Please don't text to the office or any emergency number.

**PATIENT RECORDS**

If you need paperwork of any type to be completed, it is best done face to face at an appointment. Any paperwork that is completed outside of an appointment will be billed to you personally. Insurance will not pay for this service. Please give as much notice as possible as paper work of this type cannot be completed on an emergency basis.

If you would like to have your records sent to another medical provider, therapist or clinic, please complete a Release of Information Form and send it to us.

Parts of your records that could be potentially more detrimental than helpful to your psychological wellbeing, or that were asked to be kept confidential by another provider, may be withheld.

**My signature indicates that I have read and understand the office policies of Psychiatric Services of Olympia for Linda Kellams-Keith ARNP.**

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**Signature / Printed Name**

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**Date**