

Welcome to Academy Allergy Asthma and Sinus Center

For more than 30 years, my employees and I have helped thousands of patients. The vast majority of them have appreciated the help. I will try my best to help you.

What can you expect from me?

1. I will put your best interest first during evaluation and treatment of medical problem
2. When I prescribe medicine, I will choose the most cost-effective medication
3. I will try my best to provide good care with solid judgement.
4. If I cannot help you because your medical problems are out of my specialty, then I will inform you and suggest another provider.

Forms

Most patients tell me that other doctors take patient history in a different way. I appreciate that you understand my method of patient care.

I have helped thousands of patients. To help you, I need to understand your symptoms. I can get information from you in two ways:

1. I ask you about your symptoms; you may reply in a hurry to save my time; I may misunderstand your answers. So, I will not get the comprehensive information.
2. You take your own time and write your symptoms in your own words; as you are not rushed, I will get a more accurate picture of your medical problems.

Even during follow-ups, I will ask you to write your symptoms and your medications. I want you to write your medications rather than my nurse copying the information from the chart because you may be taking medications differently than what we prescribed.

Prescriptions

We send prescriptions electronically. If the pharmacy does not receive the prescriptions, please contact us.

Labs and X Rays

We recommend lab centers that provide us the results promptly and without problems. If you go to labs other than we recommended, please contact the lab and bring copies of the lab results during follow up; please don't get frustrated at us if we cannot provide you with the results because the lab you chose did not send us the results.

Prior authorization

We will try our best for the prior authorization of a medication or a procedure. If your insurance recommends an alternative medication, please provide the exact name of the medication. If you do not know the alternative, please bring your formulary to the office so that we can look up the alternative. We will prescribe you the most cost-effective medication. We do not accept any freebies, including food from the pharmaceutical companies. Dr. Patel owns stocks, including some drug companies, in his investment portfolio. But he makes the decision objectively while prescribing medicines for you.

If the prior authorization fails, please scream at us. Hahaha. We would love to force insurance companies to approve the prior authorization right away. But we lack that power. As you pay the insurance premium, contacting the insurance company may help.

Paperwork for schools, employment, etc.

We enjoy the challenge of solving medical problems and prescribing effective treatments, but we are not pencil pushers. If you need any paperwork to be signed, please bring the paperwork with you, so that we can address it during the visit. Please do not call or email us with a request to sign the paperwork. Before we sign the paperwork, we assess the patient and the situation. An occasional patient does not understand that signing the wrong kind of paperwork can lend us into trouble; we get requests for all kinds of paperwork to be signed.

Extra Children

To allow us and you to focus on your medical problems, please do not bring extra children. We love children, who naturally show boundless energy. Will you please sell us their boundless energy? Their energy will interfere in our interactions with you. Of course, you may say my child will behave perfectly. But we are not in the business of evaluating and judging children. The simple solution - please do not bring extra children. An occasional patient misunderstands this guideline and becomes unhappy.

Insurance

Please help yourself and us by providing the correct insurance information: deductible, co-insurance, copay, and so on. If you do not know the information, please call the insurance company and find out. Please bring your insurance cards.

1. We will bill insurance companies for services as a courtesy. You must provide all the necessary information prior to your treatment. When we will bill your insurance company, you will be asked to pay any deductible, co-pay and/or co-insurance on the day of service.
2. The insurance services are provided to you with the understanding that you are responsible for the cost regardless of your insurance coverage. Please be aware that not all services are a covered benefit with different insurance companies. So, make sure you know your benefits.

3. You are responsible for any referral denials, non-covered items, deductibles, pre-existing clauses, and any additional co-pays your insurance company does not cover. You are financially responsible for all charges including billing charges.
4. Fees for office services are determined by the complexity of the medical problem, the time spent with the patient, and when indicated, the use of lab, medications, X-ray, or specialty procedure supplies.
5. Upon check-out we will collect your deductible, co-pay, co-insurance and payment for any uncovered services. We accept cash, check, and credit cards from MasterCard, Visa, and Discover & American Express.
6. All services billed to a primary insurance company and not paid by them within 35 days may become the responsibility of the patient.
7. Problems with your Bill:
 1. It is your responsibility to make payments on personal balances, and the balance on your statement is due and payable when the statement is issued and is past due if payment is not remitted within 30 days.
 2. You understand and you agree that your account will be in good standing before you receive further treatment.
 3. If you have problems paying your bill, you need to contact our office and make arrangements regarding timely payment. If you need financial assistance, please discuss with us. Dr. Patel helps needy patients.
 4. Unpaid personal accounts of aged charges may be referred to a collection agency for legal action.
 5. If your account is placed with an agency, we will no longer provide medical services for you or your family until such time as the debt is settled.
 6. If agency debt is settled, you and/or family members will need to Pay In Full upon your next visit to re-establish care with us.
8. Returned Checks are subject to a \$25.00 return check fee.
9. **Two insurances:** If I have two insurances, I will follow through which is first one and which is second one. If two insurances pass the buck to each other, I will sort out who should pay the amount I owe. If secondary insurance does not pay, I will pay the remaining portion. If none of the insurance pays, I will pay the whole bill.

Collection of Amounts Owed

If you fail to pay the amounts owed in the bill, you will pay the cost of collection, including attorneys' fees and costs, incurred by Ashok P.C. in collecting the amounts owed by you. Each party waives the RIGHT TO A JURY TRIAL in any litigation proceedings between the parties.

Cancellation policy

If you cancel the appointment without 48 hours notice, we will charge you \$50 and/or will discharge from the practice.

Prescription Refills

To refill your prescriptions, you may consider telemedicine. If you need refills of your medications, you can set up a telemedicine session during which Dr. Patel will either refill the medication or adjust the medication depending upon your progress. Telemedicine will cost you \$75 if your insurance company does not pay for it; please find out from your insurance company.

Conflict of Interest

I own stocks and other securities of companies making drugs and devices. As my portfolio continues to change, I cannot provide you the list of the securities.

Anytime you want to ask about a drug or a device, please ask us a question. If you do not want to follow our recommendation do not hesitate. You are the boss, you decide which recommendations you want to follow.

Most of the time, your insurance company controls what medications we choose from the formulary of your health insurance plan. If you find a cheaper alternative to the drug I prescribe. Please tell us right away. We go extra miles to save our patients the drug cost.

If you do not want any medication as you decide your own healthcare, please inform us. We will counsel about the problems which may develop because you didn't use the medications such as symptoms may not get better, complications from lack of treatment, emergency room visit, hospitalization and occasionally death. But of course, you decide whether you want to take medications or not.

Vaccinations

1. We recommend a flu shot to patients older than 6 months. The flu shot can prevent flare-ups of breathing problems, ER visits, hospitalizations and death.
2. Experts recommend pneumonia shots for asthma, COPD, and other medical problems. The schedule for pneumonia shots is complicated. Please talk to your primary care physician or your pharmacist.
<https://www.cdc.gov/pneumococcal/vaccination.html> and
<https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>
3. Other vaccines. Please talk to your primary care physician.

How can you become one more satisfied patient?

Based on my 30 years of experience of helping a large number of patients, I believe the following scenarios will not help either of us:

- Social Issues - I pride myself on diagnosing diseases and prescribing appropriate cost-effective medications. But I lack powers to address the social issues; for example, helping you in a custody battle of a child, asking a utility company not to disconnect your electricity, and so on.
- If you cannot focus during your visit because of the presence of your extra kids, who are acting normally with childlike energy, which can disrupt our interactions.
- Please do not get frustrated and angry at us if the insurance doesn't pay for your medications and does not authorize the tests. We will try our best to prescribe you cost-effective medication and order appropriate tests. However, we do not control your insurance company.
- If we cannot resolve your bill with us satisfactorily.
- If we cannot help with your medical problem, we will refer you to other providers.

I give my consent to the presence and involvement of healthcare industry representatives, students and trainees while Dr. Patel and his employees provide medical services to me. I authorize Dr. Patel and his office staff to contact me electronically, such as text, email, etc., regarding all my dealings and interactions with Dr. Patel.

You will be requested to get a second opinion if you do not improve after 2-3 visits with Dr. Patel. Kindly seek urgent or emergency medical care for acute medical problems.

I understand Dr. Patel and his staff may spend just a few minutes on telemedicine, may not be able to solve my health problem and still I get charged the office visit.

For a telemedicine session, we spend substantial efforts, time, and energy in the form of review, phone calls, and discussion with the doctor. Some patients do not contemplate how much time we spend before the telemedicine visit. Please do not count only the minutes you spend on the phone with us, which could be short.

Most patients do not put a timer on their visit but look forward to getting help for their medical issues. We can help the majority of patients but occasionally we can't. Even though we couldn't help you, please understand that we have spent our resources for your visit.

Vast majority of patients have found telemedicine sessions so helpful: they do not have to drive, most of the time Dr. Patel can help their symptoms get resolved, they can talk from their home or workplace, on and on. No wonder, they love telemedicine.

Occasional patient does not realize that Dr. Patel and his employees spend sizeable resources including time behind the scene to prepare for the telemedicine sessions.

Occasional patient focuses on how much time we spend on talking to them on the phone without realizing the time spent before the actual call. In that case, we apologize to occasional patient and refer to other providers.

In good faith, I will try my best to cooperate with you to resolve the financial issues. I am responsible for paying my bill. If need arises, I will contact my insurance to get the bill paid. If the insurance company does not pay the bill, I will pay it. I am solely responsible for all the payments I owe to Dr. Patel for his services even if insurance fails to pay for it. I understand and I agree.

Thank you!

Contact us

Phone: 719-542-7222 (Appointments)
719-582-5635 (Billing & Insurance)

Fax Number 719-937-5082 / 719-696-6010

Email Address mary@pateloffice.com
help@pateloffice.com

Website address: www.mybestallergist.com

Thank you for your understanding. We look forward to working with you. Please do not hesitate to give us feedback.

Respectfully,

Dr. Patel and Staff

If I do not keep my follow-up appointment, Dr. Patel may discharge you from his practice because not keeping the follow-up appointment doesn't help Dr. Patel in providing the best medical care.

I release Ashok PC, Dr. Patel, its staff and the treating provider(s) from any liability or medical claims because of my refusing the recommended test, procedure, or treatment.

For a telemedicine session, we spend substantial efforts, time, and energy in the form of review, phone calls, and discussion with the doctor. Some patients do not contemplate how much time we spend before the telemedicine visit. Please do not count only the minutes you spend on the phone with us, which could be short. (Signature)

Most patients do not put a timer on their visit but look forward to getting help for their medical issues. We can help the majority of patients but occasionally we can't. Even though we couldn't help you, please understand that we have spent our resources for your visit.

Patient signature

Date