

Treatment Policies and Care Agreement

Greenlake Psychiatric Services
6800 E. Green Lake Way NE
Seattle, WA 98115

Expectations of Care

As a patient of Greenlake Psychiatric Services you can:

- Expect to be treated with respect and consideration.
- Expect us to strive to meet your individual needs
- Expect your patient information to be kept confidential unless specifically requested or indicated otherwise by law
- Expect care in a setting that does not practice any discrimination
- Expect to be an active participant in your care, including receiving information about your condition and options for treatment
- Expect to have grievances addressed appropriately

Treatment Policies

Office Hours

Dr. Sastry's office hours are Tuesday, Wednesday and Friday from 10 to 3. New patient appointments last for 60 to 90 minutes, follow up appointments are generally 20 to 30 minutes. Intake forms must be completed prior to your first appointment.

Appointments:

Dr. Sastry reserves your appointment time for you and will make every effort to start your appointments on time. If something arises and Dr. Sastry is unable to be at your appointment, she will make every effort to reschedule you as soon as possible. It is expected that you will make every effort to be ready for your appointment on time with the understanding that if you are late, you will be seen for the time remaining in your appointment, (if more than 10 minutes of appointment time is left) but additional time will not be added. If there are less than 10 minutes of your appointment time left, you will be asked to reschedule.

The full fee will be charged for any missed appointments, no-shows or late cancellations.

Billing

Dr. Sastry is currently a preferred provider with several insurances and is an out of network provider on others. It is your responsibility to check with your insurance prior to appointment. Physician Billing Partners will, as a courtesy, submit bills on your behalf to the insurance you provide. They can be reached at: (206) 932-9025 Co-pays, balances and out of network payments are due at the time of your appointment. If you are planning on seeking reimbursement from your insurance

company as an out of network provider, Dr. Sastry can provide you with a copy of your statement.

Communication

Dr. Sastry can be reached via phone at 206-524-5656 during regular office hours Monday through Friday. Generally, calls will be taken by a staff member and information passed along to Dr. Sastry. Please be as specific as possible when providing information in order to better manage your care. Dr. Sastry (or a staff member) will try to address any issues within 24 hours. Any medication issues may take up to 48 hours.

Dr. Sastry DOES NOT communicate over email in order to better maintain issues of privacy and safety.

After hours/emergency

Dr. Sastry will manage her own phone calls after hours through an answering service. The expectation is that these phone calls are for urgent matters that cannot wait until the next business day. If there is an emergency, you will agree to go to the emergency room or call a crisis line (206-461-3222), as Dr. Sastry cannot do emergency assessments over the phone.

Prescription Policies

Prescriptions will be managed during appointments, refills will be provided to last until next recommended visit. It is your responsibility to manage your supply of medication as the processing of urgent requests cannot be guaranteed. Any controlled substances (stimulants, sleep, short-acting anti-anxiety meds,, etc) need to be monitored closely with frequent visits. Refills for those medications cannot be called in and will require an in-person visit. Dr. Sastry does not prescribe pain medications or medications to acutely manage withdrawal. Dr. Sastry will also only refill medications that she prescribes. If you are prescribed medications by Dr. Sastry, you will agree to only get those medications from her and inform her of any other similar medications you are prescribed. Dr. Sastry can utilize the Washington State Prescription Drug Monitoring Program at her discretion and any suspicious activity or results can alter your treatment.

Confidentiality

You can expect that your status as a patient and any accompanying information is confidential unless we explicitly have your written consent. This applies to picking up prescriptions, providing information to schools, faxing information, sharing information with other providers, etc. Information, such as diagnoses, appointments, treatment plans, etc., can be shared with insurance companies that we are billing for you. You are able to request your medical records.

Social Media and Networking

Dr. Sastry does not engage in social media or networking with patients in order to maintain confidentiality and professional boundaries.

Patient Satisfaction and Grievances

Dr. Sastry and her staff work to provide a high-quality, individualized, and effective experience. If you are in anyway dissatisfied with your care, please address your concerns directly with Dr. Sastry or Dr Naomi Busch (Medical Director).

Agreement for Financial Responsibility and Authorization for Release of Information

I understand that Dr. Sastry will bill my insurance for services she provides and that she is under contract with many insurances but may also be an out of network provider for others. I agree to be financially responsible for her fees and any applicable copays, deductibles or balances due.

If applicable at any time, I authorize the physician, staff, billing office and insurance company to release information required for processing of insurance claims.

This authorization is in effect until rescinded in writing.

Date: _____ Signature: _____

Treatment Consent

Consent for Care: I consent to the psychiatric examination and treatment of myself.

Date: _____ Signature: _____

Treatment Consent for a Minor:

This appointment is for a minor for whom I am the Gardian:

Consent for Care of a Minor: I, _____ hereby

(Guardian)

consent to the psychiatric examination and treatment of

(Patient)

(DOB)