



KEYSTONE RURAL HEALTH CONSORTIA, INC

Policy Title:	Cancellation/No Show Policy	Effective (Original) Date:	08/13/2015
Dept./Ops Area:	Clinical	Policy Number:	CLIN304
Approved by Board:	08/13/2015		
Reapproved by Board:	12/21/2017		
		Board President Signature	Date

Purpose: To ensure no show/cancellation rates are monitored and kept to a minimum by establishing clear guidelines for patients to follow. To enable patients waiting for appointments the ability to schedule earlier if needed or requested.

Cancellation Procedure:

- 24 hours' notice is requested for any cancellation of appointment
- Cancellations less than 24 hours for unforeseen circumstances may be reviewed and accepted by the office manager.

No Show Procedure:

- Patients that do not show up for their appointment without any notification to clinic will be considered a "No Show."
- Patients who "No-Show" or do not give 24-hour notice for cancellations three (3) times within a 12-month period may be discharged from the practice and denied any future appointments other than emergencies.
- Patients who are discharged will receive 30 day prescriptions for life sustaining medications.
- All patients' due to be discharged will be discussed with Case Manager and Provider prior to discharge.
- See No Show/Cancellation Protocol.