



Dear Patient,

Welcome to our practice! As partners in your care, we hope to keep you as healthy as possible— no matter what your current state of health may be. We will share our medical expertise with you and support your steps toward the healthy lifestyle that is so important to your wellbeing.

Few of us have a completely healthy lifestyle, but each day we can make decisions that bring us closer to that goal. Here are some important steps you can take toward better health:

- Eat a diet high in vegetables & fruits and low in fat.
- Exercise at least three times a week.
- Learn about healthy ways to deal with stress and tension.
- Maintain ties with your family, neighbors, co-workers or your religious community.
- Drink alcohol in moderation, if at all, and never drink and drive.
- Don't smoke cigarettes or use other tobacco products.
- Wear your seat belt whenever you're in a car.

Our health maintenance program starts with a “get-to-know-you” new patient visit & physical exam followed by periodic visits to monitor chronic illness/diseases you may have and annual wellness visits to plan and provide preventative care.

We look forward to working with you! Please contact us whenever you'd like to discuss about anything you think may be affecting your health.

The next few pages of this welcome packet include timely reminders and other information we think you might find useful as you join our practice.

Within the week before your scheduled appointment, you will receive an email or call from our office requesting that you complete the required new patient registration. Please feel free to contact us if you find that you need assistance with this process.

Sincerely,

The Primary Care Team at Integrated Medical Healthcare Services

Understanding Your Health Plan's Rules

Your health plan is a contract between you and your insurance carrier. When you enrolled in the plan, you agreed to the terms or rules of the contract. Your member documents explain these rules and detail what coverage benefits you have. To avoid misunderstandings about your coverage, **you need to know the rules of your insurance plan.**

If you have insurance through an employer, you are most likely in an HMO or managed care plan. Medicaid is nearly always a managed care plan and if you have Medicare, you might be in a managed care plan too. You can't always tell if you're in an HMO from the name of the plan. If you're unsure or have questions, check with your insurer.

For most plans, the important rules fall into these groups:

- **Doctors and hospitals the plan works with.** Managed care plans sign contracts with certain doctors and hospitals to care for their plan members. Your plan may refer to them as providers. This group of providers is often called the plan's network. Like you, they have agreed to follow the plan's rules. Your insurance company may not pay for you to go to a provider who is not in its network. If it does pay for you to use a provider outside your

network, it may pay less than it would for a network provider. In either case, you are responsible for the part of the bill that the plan doesn't pay.

- **Rules for seeing specialists.** Many managed care plans won't pay for you to see a specialist unless your primary care physician thinks it is necessary. If you see a specialist without a referral, you may have to pay more for the care you receive.
- **Rules for getting expensive services.** In a non-emergency situation, if your doctor decides that you need to go to the hospital, have surgery, or have certain tests, your insurance company may refuse to pay, unless the service/treatment has been pre-authorized (approved beforehand).
- **Medicines the plan approves.** Almost every insurance plan has a drug formulary or preferred drug list. A formulary is a list of prescription medicines that your health plan has pre-approved. If a drug isn't on the formulary, you'll have to pay for part or all of the cost. You can also ask your doctor to prescribe an alternative drug that is on the formulary. Your insurance company can give you a list of drugs that are on the formulary.



A WORD TO OUR PATIENTS ABOUT...

Medicare and Wellness Care

We want you to receive wellness care—health care that may lower your risk of illness or injury. Medicare pays for most wellness care, but it does not pay for all the care you may want or need. We want you to know about your Medicare benefits and how we can help you get the most from them. You can find out more about preventative services covered by Medicare in the current year *Medicare & You* handbook.

One of the most confusing issues for patients with Medicare is when and how to get their “yearly physical”. **While Medicare does not pay for a traditional, head-to-toe physical**, it does pay for a wellness visit once a year to identify health risks and help you to reduce them. At your wellness visit, our primary care team will review your complete health history and provide several other services:

- Screenings to detect depression, risk for falling and other problems
- A limited physical exam to check your blood pressure, weight, vision and other things depending on your age, gender and level of activity
- Recommendations for wellness services and healthy lifestyle changes
- Discuss Medicare-covered services that allow our care team to more closely monitor your health conditions and update your plan of care

Before your appointment, our staff will ask you some questions about your health and may ask you to fill out a form to help identify your health risks.

Medicare wellness visits do not deal with new or existing health problems. Addressing these problems is a separate service. Please let our scheduling staff know if you need your clinician’s help with a health problem, a medication refill or something else. *A separate charge applies to these services, whether provided on the same date or a different date than the wellness visit.* We encourage you to schedule regular follow-up visits to stay up-to-date with routine issues.

Preventative/Well Visits and Co-Pays

While preventive care services are generally “co-pay free”, occasionally patients/guardians will have additional concerns about their/their child’s health which are not considered part of a routine well care visit and require extra time. For your convenience and if the schedule permits, we may try to address these added problems while you/your family are in the office. In these circumstances, it is appropriate for us to bill for the added office visit time. Many insurance companies are now asking that we collect the co-pay typically associated with the added service at the end of the office visit. If it is more convenient for you/your family, we can also schedule a future appointment to address these additional health concerns. Our goal is to provide you/your family the very best care- comprehensive, convenient and fairly priced- without any added surprises!





Patient Rights and Responsibilities

The Care Team at Integrated Medical Healthcare Services, PLLC is committed to providing you with quality care. It is our pledge to provide this care with respect and dignity. In keeping with this pledge and commitment, we present the following Patient Rights and Responsibilities:

You have the right to:

- A personal clinician (physician or other qualified health care practitioner) who will see you on an on-going, regular basis.
- Competent, considerate and respectful health care.
- A second medical opinion from the clinician of your choice, at your expense.
- A complete, easily understandable explanation of your condition, treatment and prognosis.
- The personal review of your own medical records by appointment and in accordance with applicable State and Federal guidelines.
- Confidential management of communication and records pertaining to your medical care.
- Information about the medical consequences of exercising your right to refuse treatment.
- The information necessary to make an informed decision about any treatment or procedure, except as limited in an emergency situation.
- Compassionate management in the least restrictive manner appropriate for treatment needs and goals.
- An individualized treatment plan.
- Have your pain evaluated and managed.
- Refuse to participate as a subject in research.
- An explanation of your medical bill regardless of your insurance and the opportunity to personally examine your bill.
- The expectation that we will take reasonable steps to overcome cultural or other communication barriers that may exist between you and the staff.
- The opportunity to file a complaint should a dispute arise regarding care, treatment or service or to select a different clinician.

You are responsible for:

- Knowing your clinician's name and title.
- Giving your clinician correct and complete health history information (e.g. allergies, past and present illnesses, medications and hospitalizations).
- Providing staff with correct and complete name, address, telephone and emergency contact information each time you see your clinician so we can reach you in the event of a schedule change or to give medical instructions.

- Providing staff with current and complete insurance information, including any secondary insurance, each time you see your clinician.
- Signing a “Release of Information” form when asked, so your clinician can get medical records from other clinicians involved in your care.
- Telling your clinician about all prescription and over-the-counter medications you may take as well as any supplements and alternative therapies you may use. If possible, bring the original bottles/boxes to your appointment.
- Telling your clinician about any changes in your condition or reactions to medications or treatment.
- Asking your clinician questions when you do not understand your illness, treatment plan or medication instructions.
- Following your clinician’s advice. If you choose to refuse a treatment or follow recommendations given by your clinician, you may be asked to sign an “Informed Refusal” form. An “Informed Refusal” documents that having been counseled on the potential negative outcomes of your refusal, you have made an informed decision and accept responsibility for the consequences of your decision.
- Keeping your appointments. If you must cancel your appointment, please call us at least 24 business-hours in advance. Cancellations within 24 hours may be subject to a no-show fee.
- Paying copayments at the time of the visit and/or statements upon receipt.
- Following the office’s rules about patient conduct.
- Respecting the rights and property of our staff and other persons in the office.