

Medical Home Agreement - 2016



Patient: _____

Thank you for allowing Choctaw Family Medicine to be your Choice “Medical Home”. We appreciate every patient, both new and existing and welcome this opportunity to serve you. We would like to establish the correct expectations so that you will understand our commitment to you as your Care Management Team as well as our expectations for our patients.

- ❖ In order to provide continuous and comprehensive care, CFMA will provide all necessary primary and preventive services for you and or your family. **Please make every effort to see us first. However, if you are seen at another clinic, E/R, or hospital, please request that any medical notes or results be sent to our office. They can be mailed or faxed. Please remember it is your responsibility to advise us when you have received treatment elsewhere/outside your medical home. (For example: E/R, urgent care, other physician clinic etc.)**
- ❖ Care Coordination/Prior Authorization – **You should schedule an appointment with us first so that our Physicians can document your health record, make recommendations and order your testing or specialist care.** When a referral is necessary we will gladly schedule your appointment.
 - As your medical home we will work with your insurance to facilitate the approval for services needed. Some procedures require “Prior Authorization” before care can be rendered. Your insurance medical authorization unit in coordination with the Physician of the Medical review unit makes these decisions. It has been our experience that your insurance will send the patient a letter notifying them if services are approved or denied.
 - PLEASE make sure we have your complete information including social security numbers of patients and or parents. **This information is required.** You will be notified by our referral clerk of your appointment time and location unless the specialist prefers to contact you directly to make your appointment. Should this occur please inform us of the scheduled appointment.
- ❖ Accessibility – We see patients daily and our Normal office hours are as follows:
 - Monday, Tuesday, Thursday and Friday 8:00 a.m. - 5:00 p.m.*
 - Wednesday, 8:00 a.m. – 12:00 noon*
 - Closed daily for lunch from 12:00 – 1:30 p.m.*
 - *See our website for Holiday Schedule and Office Closing dates www.choctawfamilymedicine.com*
 - We also make available 4 additional hours outside of normal business time frames which are based on patient need and request. Please let the front office know that you need an appointment during these time frames and we will be happy to accommodate you.
 - Monday 7:30 a.m. – 8:00 a.m. or 5:00 p.m. – 5:30 p.m. Tuesday 7:30 a.m. – 8:00 a.m. or 5:00 p.m. – 5:30 p.m.
 - Thursday 7:30 a.m. – 8:00 a.m. or 5:00 p.m. – 5:30 p.m. Friday 7:30 a.m. – 8:00 a.m. or 5:00 p.m. – 5:30 p.m.
 - NOW, SICK TODAY, SEEN TODAY- SAME DAY SICK Walk-in visits available -no appointment necessary.
- ❖ Please utilize our phone system correctly and leave your message in the appropriate mailbox allowing us time to call you back. Calls made after 4:30 p.m. are returned the next business day. Please do not call more than once as this will further delay us calling you back.
- ❖ On Call Physician – If you need to speak to our Physicians “after-hours” regarding an urgent medical issue, you may call 405-390-9600, prompt # 7 and leave a message for our on-call Physician. They will return your call as soon as possible. Please leave complete information with your call back number or they cannot return your call.
- ❖ Child Health Exams (EPSDT)- As your medical home we will follow your children’s health as they grow by providing Well Child exams also known as EPSTD visits. Please help us to care for your children by following Child Health services in your Sooner Care handbook, or your specific insurance guidelines.
- ❖ Adult Care and Disease Management –Please Help ensure a positive outcome by complying with Dr’s orders. Adhere to your care plan and keep scheduled exam and or testing appointments. We are a team and it requires everyone to do their part. Please also remember to communicate any concerns or if you don’t understand something, please ask questions.

Please remember we do our best to see all of our patients in a timely manner. By keeping scheduled appointments or by notifying us of cancellations at least 12-24 hours in advance you will help us better serve every patient that needs our attention.

Cary L. Carpenter, M.D. P.C.

Patient/Guardian Signature

Date