



## **Welcome to Outer Cape Health Services**

We are grateful for your choosing us as your healthcare provider.

This New Patient Admissions Packet must be completed and returned to us prior to your first appointment being scheduled. ***Please complete all forms in black ink only to ensure readability when scanned.***

This packet includes the following:

- 1) **Notice of Privacy Practices:** Please review this notice carefully.
- 2) **Patient Registration Form:** Please complete all portions of this form. Note that as a Federally Qualified Health Center, we are required to collect demographic information regarding the patients we serve. The information you provide is confidential.
- 3) **Health History Questionnaire:** A summary of your medical history, medications, allergies, health habits and family health history. Please record all medication you are on, including any over-the-counter medication and supplements you take.
- 4) **Treatment, Payment and Data Agreement:** Needs to be signed prior to seeing a clinician.
- 5) **Authorization for Request of Protected Health Information:** To ensure continuity of care, we must receive any medical records from your previous Primary Care Provider (PCP). It is your responsibility to complete the Authorization form in order to grant us permission to request records from your previous practice.

### **Please review the following Patient Responsibilities:**

- ❖ Insurance: We do not accept all insurance plans. If you have an insurance for which we do not file, you are responsible for payment at time of service. You may submit your receipt to your insurance company yourself for reimbursement, although we cannot guarantee what reimbursement will be made, if any, by your insurance plan.
- ❖ We accept cash, check and credit card payments.
- ❖ If you have an insurance plan that requires assignment of a PCP, it is your responsibility to contact your insurance company of your new PCP
- ❖ Co-payments: Any co-pay that is required by your insurance company is due at time of visit.
- ❖ Prescriptions: We require 48 hours' notice to process all prescription refill requests. If you request a refill on a Friday, it may not be available until Monday.
- ❖ Controlled Substances will not be refilled at the first visit.

**Please arrive 20 minutes prior to your appointment.**

*Thank you for choosing Outer Cape Health Services!*