

Welcome to **JMH Orthopedic Surgery and Sports Medicine**. To ensure the highest quality service and care to our patients, we have policies and procedures we ask you to observe. If you have any questions or concerns, please address them with the staff before your office visit. Our goal is to ensure that your experience at all Johnson Memorial Physician Network is exceptional. We've outlined pertinent information that is needed to make sure your visit runs smoothly. Please be aware that without these items, the Johnson Memorial Hospital Physician Network reserves the right to reschedule your appointment.

<u>Patient Information:</u> Enclosed is a Patient Registration and Medical History Form for you to complete. Please have these forms completed before your arrival and ready to give your medical team.

<u>Insurance Cards:</u> To bill your insurance, we require a copy of your current insurance card(s) at each visit.

If you are unable to provide your insurance information at the time of your office visit, we will consider you uninsured and will bill you as a private pay patient.

<u>Photo Identification:</u> To protect the identity of each of our patients and comply with federal laws, we are required to view a photo ID or valid driver's license, at *every visit*. JMH Physician Network reserves the right to reschedule your appointment if you do not present a photo ID.

<u>Current Medication List:</u> To help your provider understand your overall health status and to expedite entering your medical history we require our patients to bring with them, a current medication list, including medication name, dosage, and frequency. Controlled substances that are used as a maintenance medication will not be called in after hours or on weekends. These medications may require a hand-written prescription.

<u>Late Arrival</u>: Patients are required to be on time for their scheduled appointments. New patients are required to arrive 20 minutes early with their new patient packet. You may be required to complete additional paperwork before being seen. In the event of late arrival, it will be at the discretion of the provider if they will be able to see you. You may be asked to reschedule your appointment to maintain the integrity of the provider's schedule.

<u>Cancellations/No Shows:</u> If you are unable to keep your appointment, you are required to give 24 hours' notice. If you no-show or fail to provide sufficient notice of cancellation, you may be dismissed from the practice.

<u>Co-Pays and Uncollected Balances:</u> Our Patient Service Representative will collect your insurance co-pay at the time of check-in. If you have a previous balance for services performed at Johnson Memorial Health, payment will be required. Unpaid balances may result in bad debt collections and possible dismissal from our practice. In the event an account is sent for collection proceedings, the guarantor of the account will be responsible for all collection costs.

<u>Medical Records:</u> Upon written request and signature, a copy of your medical records will be released to you. This process can take up to 5 business days. The state of Indiana has imposed a pre-defined fee schedule for copying medical records that will be charged accordingly to the patient.

<u>Prescriptions:</u> Prescription refills must be authorized by the provider and may take between 24-48 hours for approval. Refills will not be authorized after normal business hours.

Patient Signature:	Date:	,	,	
The Physicians and Staff at Johnson Memorial Health Physician Network				
we look forward to meeting you and establishing a relationship to meet you	r nealthcare i	neeas!		

Patient Name Printed: