



The Patient–Provider Partnership for Family Tree Medical Associates

The health and wellness of our patients is the top concern for Family Tree Medical Associates. Providing the best possible care to **every** patient is our primary goal. The only way we can meet this goal is if I, your provider (Doctor or Nurse Practitioner) and you the **BOSS OF YOUR HEALTH**, work together within our practice as well as with all your specialty providers. This is what it means to be a part of our Patient Centered Medical Home.

Patient Responsibilities:

- When a minor child (under 18 yrs) is being treated without the parent present a note will accompany the child or person bringing the child. He/she **CANNOT** be treated without this.
- **You agree to comply with FTMA Health Screening Measures (see attached)**
- Ask questions, share your feelings and be a part of your care in a respectful manner even when you are angry or upset
- Be honest about your history, symptoms, and other important information about your health
- Prepare for your appointment by getting all necessary labs done and writing down any questions you have
- Talk with someone in the practice if you have anything (such as financial constraints, transportation issues, etc.) that keeps you from getting labs done, seeing a specialist, or keeping your appointments within this practice
- Call Family Tree Medical first with all problems, unless it is a medical emergency. **Avoid using the urgent care and Emergency Room during office hours**
- If you do not understand something during your visit **ASK UNTIL YOU HAVE A CLEAR UNDERSTANDING OF THE PLAN**
- Understand that you may receive multiple letters throughout the year reminding you of services you need. These are sent so we all stay in compliance to the National Quality Measures which are required by many insurance companies.
- Failure to communicate with this office regarding your barriers, not following the treatment plan established with your care team, and/or not cancelling your appointments greater than 24 hours prior or not showing for your appointments may result in discharge from this practice. **ANY FEE APPLIED FOR NOT SHOWING OR CANCELLING PRIOR TO 24 HOURS OF THE APPOINTMENT IS NOT PAYABLE BY ANY INSURANCE COMPANY.**
- Agree to follow the guidelines established in Financial Policy set up by FTMA. You will review the financial agreement regularly and be aware of the guidelines. Most importantly you contact this office with any financial barriers you are having. **ALL** aspects of the financial agreement apply even when someone else accompanies a minor child to the appointment.

Provider (Doctor or Nurse Practitioner) Responsibilities:

- Explain diseases, treatments, and results in an easy to understand way
- Listen to your feelings and answer your questions to help you make decisions about your care
- Keep treatments, discussions, and records private
- Provide 24 hour access to medical care and same day appointments, whenever possible. You can reach the care team outside of office phone hours (M–Th 8:30am–4:30pm and Fri 8:30am–4pm) at 269–945–9567
- Provide instructions on how to meet your healthcare needs when the office is not open

- To care for you to the best of my abilities based on our understanding of current medical methods available and by staying up to date on my medical education
- Give you clear directions about medicines and other treatments
- Send you to trusted specialists through your medical neighborhood
- End every visit with clear instructions about expectations, treatment goals, and future plans
- We will make contact with you when you miss or cancel or don't show for an appointment. The contact could be by telephone, letter, e-mail, or electronic voice messaging system.

By signing this I agree to follow the above responsibilities and I will share this agreement with the family members listed below. Signature _____ Date _____

Family members (including spouse) _____
