

PATIENT OFFICE POLICY NOTIFICATIONS

1. I understand that Partners in Family Medicine participates with McLaren Macomb Hospital Lab. If my lab work is required to go to a different lab, per my insurance company, I agree to inform the medical assistant prior to testing at each office visit.
2. Your insurance company requires the office to obtain a prior authorization before any diagnostic services are performed at an outpatient facility. Please allow at least 7 days from the time you schedule your diagnostic test for staff to obtain the authorization from your insurance company.
3. On occasion your insurance company may require a prior authorization for prescribed medication. Please allow 7 business days for your insurance company to approve your prescribed medication.
4. Some insurance plans require a deductible, copay, or co-insurance payment as part of your contract. These contract obligations are collected at the time of service.
5. For your convenience, please request medication refills at the time of your appointment. If you are calling the office directly for refills please allow 24-48 hours for refills to be sent to your pharmacy or printed for pick up in the office.
6. To protect your personal health information, and due to increased federal regulations on controlled substances, prescriptions/test results and paperwork will only be released to persons listed on your release of information form with your authorized, witnessed signature.

By signing below I have read and understand the above office policies:

Signature of patient/Guardian

Date

Printed name of Patient

Date of Birth