

Dear New Patient:

Welcome to Burket Family Medicine! We look forward to being a partner in your health.

At Burket Family Medicine, there is no wrong door to care. Whether you are seeking medical care, mental health care, or substance use treatment, our providers and staff work together to meet your health care needs. We welcome all our new patients.

As a patient of Burket Family Medicine, you and your provider will work with other health professionals to coordinate your care. This is called your health care team. The most important person on your team is you. When you have concerns about your health, your health care team will help you get the services you need when you need them. Also, did you know that we provide many preventative services that may be covered at little or no cost to you through your insurance? (i.e.: Annual wellness; Well Women Exams, Well Child Checks; Breast exams, Cervical cancer Screenings) Ask a member of your healthcare team to provide you with a full list of services that are typically covered. ****Patients should also confirm co-pays or out-of-pocket costs with their personal insurance plans, to reduce false expectations or surprise bills for items such as subsequent tests, follow-up appointments, referrals, or specific diagnoses****

Your health care team will keep a complete record of your medical history, health status, medications, test results, self-care information, and care received from other doctors. By getting to know you, your team can help you understand your healthcare needs and provide you with the information you need to manage your health.

To get started, just call or drop by our office to schedule your new patient appointment. In the following pages is information to help you prepare for new patient appointments for medical care, mental health care or substance use treatment. Our staff will help you complete new patient paperwork and discuss payment or insurance billing options. Would you like to speed up your first visit? Fill out your new patient packet ahead of time. You may print forms at home or request a packet be sent to you in the mail. We will provide you with a self-addressed, stamped return envelope.

Thank you for choosing Burket Family Medicine as your health care home.

Sincerely,

Your Burket Family Medicine Health Care Team



BURKET FAMILY MEDICINE

New Patient Information

Clinic Location, Phone Numbers & Hours

Patient-centered primary care

Address	Phone	Hours	After hours
2195 NE Professional Ct. Bend, Oregon 97701	All clinic inquiries: 541-322-9396	Mon -Thu, 8am – 5pm Fri, 8am – 12pm Closed Sat & Sun	After-hours service: 541-419-9963

Patient Portal

For non-urgent communication with your provider, we encourage you to sign up for the secure online Patient Portal. The Patient Portal is a quick and easy way to review your health information, schedule appointments, and communicate with your provider. As a new patient, you will receive instructions on how to sign up for the Patient Portal through “My chart”. Our staff strives to respond to patient portal messages within 2 hours. If you have questions or need assistance, please talk with a member of our reception team.

Prescription Refills

When you need a prescription refilled, please call your pharmacy directly, even if there are no refills remaining. Your pharmacy contacts and coordinates all refill requests directly with your health care team. Please allow 72-hours for prescriptions to be refilled.

Billing Questions

If you have questions concerning your statement, please contact the billing office using the telephone number listed on your statement.

Website

All forms, registrations, policies and new patient paperwork can be found on-line through our website www.burketfamilymedicine.com



BURKET FAMILY MEDICINE

Preparing For Your First Primary Care Visit

At Burket Family Medicine, our providers and medical care team will provide you with the services you need, when you need them—including specialty care coordination for patients with diabetes, chronic pain, alcohol, substance use problems and other complex health conditions. Within your first appointment, you will be able to talk with your health care team about your treatment needs and options.

How to Prepare for Your New Patient Medical Appointment

- Arrive 20 minutes before your new patient appointment
- Bring picture ID—a current state or federal issued ID—for example, a driver’s license, ID card, or passport
- Bring your insurance card to all appointments
- Be prepared to pay your co-payment if required by your insurance plan
- Make a complete list of all the medications that you currently take (including vitamins and supplements), or bring the containers with you to your appointment, or bring a printout of your current medications from your pharmacy
- Be prepared to discuss your top health concerns with your provider; follow-up appointments may be scheduled following your initial visit

Appointments: Schedule / Reschedule / Cancellations

Please call your provider’s office as soon as you can. We request 24-hour notice for cancelled visits. This will allow us to offer the time slot to another patient.

Open Access Appointments

Our primary care clinic offers Open Access Scheduling, also known as same day appointments. To learn more about same day appointments, please call the office.

Our Primary Care Services

Medical Care

- Preventative Care
- Acute Care
- Family Planning
- Men’s & Women’s Health
- STD Tests & Treatment
- Chronic Disease Care
- Immunizations

Lab & Xray Orders

- Well-Baby & Well-Child Exams
- Teen & Young Adult Health
- Sports Physicals
- Immunizations

Collaborated Care

- Mental Health

Individual and Group Psychotherapy

- Medication-Assisted treatment
- Pain Management
- Chronic Illness Management
- Tobacco Cessation
- Medication Management
- Individual Psychotherapy
- Pediatric Referrals to Specialty Care
- Substance use counseling

Burket Family Medicine accepts most healthcare insurances, both state issued Medicaid and most private payers.

Your health insurance policy is an agreement between you and your insurance company. Each policy lists a package of covered medical benefits such as tests, drugs, and treatment services. The insurance company agrees to cover the cost of certain benefits listed in your policy. These are called covered services.

Your policy also lists the kinds of services that are not covered by your insurance company. You must pay for any uncovered medical care that you receive.

A medical insurance policy also has an agreement between them (the payer) and your providers' office. In this agreement a certain percentage is agreed upon. And this is then paid to the providers' office after certain other criteria is met, such as deductibles, copays, and other out of pocket costs.

Most insurance plans will cover a set of preventive services. This does not always mean they are free. You may still need to pay deductibles, copayments, or other out-of-pocket costs.

These preventive services include immunizations and certain health screenings. Please check with your providers office and they can help you navigate your insurance benefits to determine which services you may be entitled to free of charge.

Preventive services can detect disease or help prevent illness or other health problems. The types of preventive services you need depend on your gender, age, medical history, and family history. All plans from the Health Insurance Marketplace must cover the following without charging a copayment:

For all adults:

- Abdominal aortic aneurysm one-time screening (for men ages 66-75 who have smoked)
- Age- and condition-appropriate vaccinations
- Alcohol misuse screening and counseling
- Aspirin use for adults 50-59 years who would benefit from it
- Blood pressure screening
- Cholesterol screening for adults with higher risk
- Colorectal cancer screening for adults 45-75 years
- Depression screening
- Diabetes (Type 2) screening for adults 40-70 years who are overweight
- Diet counseling for adults with risk of chronic disease
- Fall prevention for adults 65 years and over
- Hepatitis B screening for those at increased risk

- Hepatitis C screening for those at increased risk
- HIV screening
- Lung cancer screening for adults 55-80 years who are at increased risk for lung cancer due to smoking
- Obesity screening and counseling
- PrEP (pre-exposure prophylaxis) HIV prevention medication
- Sexually transmitted infection prevention counseling for those at increased risks
- Statin preventive medication for adults 40-75 years at high risk
- Syphilis screening for those at increased risk
- Tobacco use screening
- Tuberculosis screening for adults at increased risk

For pregnant women or women who may become pregnant:

- Anemia screening
- Breastfeeding comprehensive support and counseling
- Contraception
- Folic acid supplements
- Gestational Diabetes Screening
- Gonorrhea screening for all women at increased risk
- Hepatitis B screening for pregnant women
- Preeclampsia prevention and screening
- RH incompatibility screening
- Syphilis screening
- Expanded tobacco intervention and counseling for pregnant women who use tobacco
- Urinary tract or other infection screening

Other covered preventive services for women:

- Breast cancer genetic test counseling for women at increased risk
- Breast cancer mammography screenings every 1 to 2 years for women over age 40
- Breast cancer chemoprevention counseling
- Cervical cancer screening (This includes a Pap test every 3 years for women 21-65 years)

- Chlamydia infection screening
- Diabetes screening
- Domestic and interpersonal violence screening and counseling
- Gonorrhea screening
- HIV screening and counseling
- Osteoporosis screening for women over 60 years
- Rh incompatibility screening follow-up testing
- Sexually transmitted infections counseling
- Syphilis screening
- Tobacco use screening and interventions
- Urinary incontinence screening
- Well-woman visits for women under 65 years

Preventive health services for children (and when they should be provided) depend heavily on age.

***These services may differ from Private payers and change from year to year.