Integrative Family Medicine of Bend

Office Policy Agreement

Thank you for choosing Integrative Family Medicine of Bend (IFM Bend) for your healthcare. We are committed to providing you and your family with quality, personal health care, and appreciate your commitment to adhere to this **Office Policy Agreement**. Agreement with this policy is required for all medical care.

<u>HOURS:</u> (visits by appointment only) Office hours:

- Monday and Wednesday 8:00 am to 5:00 pm
- Tuesday and Thursday 8:00 am to 2:00 pm
- Friday 8:00 am to 12:00 pm

<u>APPOINTMENTS</u>: Please arrive at least 15 minutes early for your appointment. Please make sure you have completed any forms that were emailed to you prior to the visit. If you arrive later than your designated arrival time, you may be asked to reschedule.

MISSED APPOINTMENTS: If you are unable to keep your scheduled appointment please call our office at least two business days prior to your appointment and reschedule. Broken appointments prevent us from caring for others who could have been seen in the time set aside for you. If you miss or cancel your appointment with less than a 24hr notice, our office reserves the right to bill you \$50.00 for each no-show or late cancellation. The fee will be your responsibility and will not be billed to your insurance.

<u>PRESCRIPTION REFILLS:</u> Please contact your pharmacy directly for a prescription refill. The pharmacy will then contact us via fax requesting the prescription refill. Please allow 48 hrs for us to process refill requests. Refills for controlled medication require 3 business days. Contacting the pharmacy and then the office will not speed up this process, it only duplicates request and slows the refill process.

<u>PATIENT REGISTRATION:</u> We ask that all our patients fill out a new patient registration/or review the current information we have on record once a year and provide valid insurance card.

HIPAA: It is required that all patients fill out a HIPAA form on a yearly basis.

<u>MEDICAL RECORD</u>: In accordance with Oregon law, IFM Bend requires a HIPAA compliant written request for the release of medical records.

<u>DIAGNOSTIC/LAB STUDIES:</u> If you would like a copy of your lab results or a diagnostic study ordered by our physicians, these will be made available to you on the patient portal, or you can request this with a signed Personal Use Only Medical Record Release to be reviewed and signed by the patient on a yearly basis.

I have read, understand, and agree to comply with the terms of FCIM Office Policy. I understand that it is my responsibility to read the policy I have been offered and if I have any questions or need clarification I can contact the Clinic Administrator Monday-Friday 8:00am-4:30pm.

<u>PATIENT PORTAL:</u> IFM Bend utilizes a patient portal to enhance patient-physician communications with all established patients. We strive to keep all the information in your records correct and complete. If you identify any discrepancy in your records on the portal, you agree to notify us immediately.

The patient portal can be used to communicate with your healthcare team. You can send a message with non-urgent medical questions, to request appointments, and to request prescription refills. Please be aware that this platform should NOT be used for any urgent medical needs. Clinical staff will respond to your message within 2 business days.

The data is on a HIPAA compliant. While we believe that the IT infrastructure and data are safe and secure, it does not guarantee that unforeseen adverse events cannot occur. The use of the patient portal is completely voluntary and will not adversely affect the care you receive at IFM Bend if I decide against using the portal.

COPY AVAILABLE UPON REQUEST

| Patient Signature (or responsible party for patient) | Date |
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