Winchester Physicians Associates
Patient Centered Medical Home Patient Compact

A Patient Centered Medical Home is a trusting partnership between a doctor-led healthcare team and an informed patient. It includes an agreement between the doctor and the patient that acknowledges the role of each in the total healthcare program.

We trust you, our patient to:

• Tell us what you know about your health and illnesses
• Tell us about your needs and concerns
• Take part in planning your care
• Follow the care plan that is agreed upon, or let us know why you cannot so we can try to help and change the plan
• Tell us what medications you are taking and ask for refill at your office visit when you need one
• Let us know when you see other doctors and what medications they put you on or change
• Ask others to send us a report about your care when you see them
• Learn about your insurance so you know what it covers
• Keep your appointment as scheduled, or call and let us know you cannot at least 24 hours in advance
• Pay your share of the visit fee when you are seen in the office
• Give us feedback so we can improve our service.

As we build your Medical Home you will notice some changes in the way we provide care, but many things will stay the same. We will continue to:

• Provide you with your own doctor who knows you and your family whenever he/she is available
• Respect you as an individual-we will not make judgments based on race, religion, gender, sexual orientation, gender identity, or disability
• Respect your privacy-your medical information will not be shared with anyone unless you give us written permission or it is required by law
• Provide care by a team of people led by your doctor
• Provide, or help arrange for, the care you need when you need it
• Ensure that the care we provide meets your needs and fits with your goals and values
• Give care that is based on quality and safety
• Have a doctor on call 24 hours a day, 7 days a week
• Take care of short illness, long-term disease and give advice to help you stay healthy
• Tell you about your health and illness in a way you can understand.

Over the next several months, you may notice that:

• We ask what your health care goal is, or what you want to do to improve your health
• We use current best evidence in decision making about your care and offer support for self-management of your health and healthcare
• We ask you to help us plan your care, and let us know if you think you can follow the plan
• We will give you a written copy of the care plan
• The team care members are doing more and/or different parts of the care
• We remind you when tests are due so you can receive the best quality care
• We may ask you to have blood tests done before your visits so the doctor has the results at your visit
• We may offer you a chance to join in a special type of doctors visit called a “group visit”
• We continue to increase the use of technology as we manage your healthcare in ways such as ePrescriptions, eVisits, and self management support material through Healthwise and Up-To-Date.

As part of our Patient Centered Medical Home orientation, we will ask you to acknowledge your agreement to the above, and we will acknowledge our agreement to you.

Either you or your doctor may end this partnership at any time. If you choose to end the partnership, please notify us and tell us why. If your doctor decides to stop seeing you, we will notify you with an explanation as to why. With your written permission, we will forward a copy of your information to your next doctor.

________________________________________
Patient Signature and Date of Birth

________________________________________
Date