

**WELCOME TO YOUR PATIENT-CENTERED MEDICAL HOME RECOGNIZED by
the NATIONAL COMMITTEE FOR QUALITY ASSURANCE (NCQA)!**

As a Patient-Centered Medical Home, our approach is to provide our patients with comprehensive health care, which is focused on all aspects of your health and overall well-being, including emotional, family, and social concerns. Along with your physician and care team, you are the most important person in managing your health.

A “Medical Home” makes it easier and more comfortable for you to access care on a day-to-day basis by strengthening your relationship with your primary care provider and the team responsible for your care. With a medical home, your quality of care will be significantly improved, and it will take less time for you to get the care when you need it.

Benefits of a Medical Home Team

- ✓ Your medical home team will have an ongoing relationship with you and your family to manage your healthcare needs.
- ✓ You will see the same team each visit and they will assist you in coordinating care with other providers, specialists, and community resources if needed.
- ✓ Your team will have access to all of your health information via the patient portal at MyFetterHome in order to effectively manage your care.
- ✓ You will have easy access to care through same-day appointments, extended operating hours, and other methods of communication with your team.

How You Can Help

- ✓ Talk with your primary care provider and team about any questions you have.
- ✓ Keep in touch with your team if further questions arise about your health.
- ✓ Take care of your health by following the plan recommended by your team.
- ✓ Always let us know how we’re doing and how we can improve.



Patients:

Fetter Health Care Network (FHCN) is a Federally Qualified Health Center that provides a full scope of primary for all medical, dental, behavioral and substance abuse services for patients regardless of an individual's ability to pay. We treat patients through all the stages of life-from pediatrics to geriatric care. Due to new federal reporting regulations, the following information is now required for each patient. Please note that all information is confidential. We will need to collect this information on an **annual basis**.

| PROOF OF IDENTITY/DATE OF BIRTH AND RESIDENCE. YOU MUST SHOW ONE OF THE DOCUMENTS LISTED IN BOTH CATEGORIES. PHOTOCOPIES ARE ACCEPTABLE | |
|---|--|
| Identity/Date of Birth | Residency/Home Address |
| <ul style="list-style-type: none"> • Driver's license/Official photo ID • Passport • Official school records • Adoption records • Official hospital/doctor birth records • Naturalization certificate • Marriage records • Immigration Document <ul style="list-style-type: none"> • Consular ID card (CID) | <ul style="list-style-type: none"> • ID card with address • Postmarked envelope, postcard, or magazine (cannot use if sent to a PO Box) • Driver's license issued within the last 6 months • Utility bill (gas, electric, cable), bank statement, correspondence from a government agency which contains name and street address. • Letter/lease/rent receipt with the home address from the landlord • Property tax records or mortgage statement |

| PROOF OF CURRENT INCOME AND EXPENSES: YOU MUST PROVIDE A LETTER, WRITTEN STATEMENT, OR COPY OF CHECK STUBS, FROM THE EMPLOYER, PERSON OR AGENCY PROVIDING THE INCOME. SUBMIT ALL THAT APPLY AND PROVIDE THE MOST RECENT PROOF OF INCOME BEFORE TAXES. THE PROOF MUST BE DATED, INCLUDE THE EMPLOYEE'S NAME AND SHOW GROSS INCOME FOR THE PAY PERIOD | | | |
|---|--|---|--|
| Wages and salary <ul style="list-style-type: none"> • Paycheck stubs (2 consecutive weeks) • Letter from employer on Company letterhead • Income tax return / W2 | Social Security <ul style="list-style-type: none"> • Award letter/certificate • Benefit check • Correspondence from Social Security Administration | Military Pay <ul style="list-style-type: none"> • Award letter • Check stub | Child Support / Alimony <ul style="list-style-type: none"> • Letter from the person providing support • Letter from the court • Child support/alimony check stub |
| Self Employed <ul style="list-style-type: none"> • Signed and dated income tax return and all schedules. • Income Self-Attestation Form | Worker's Comp <ul style="list-style-type: none"> • Award letter • Check stub | Veteran's Benefits <ul style="list-style-type: none"> • Award letter • Benefit check stub • Correspondence from the Veteran's Administration. | Unemployment Benefits <ul style="list-style-type: none"> • Award letter/certificate • Benefit check • Correspondence from Department of Labor |
| Income from Rent <ul style="list-style-type: none"> • Letter from tenant • Check stub | Interest/Dividends/ Royalties <ul style="list-style-type: none"> • Statement from a bank, or credit union • Letter from broker • Letter from agent | Other Employment <ul style="list-style-type: none"> • Work Statement Verification Form. | Private Pensions and Annuities <ul style="list-style-type: none"> • Statement from pension/annuity |

| TYPES OF PAYMENT ACCEPTED FOR SERVICES. PAYMENT IS EXPECTED IN ADVANCE. | | |
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| Medical Insurance Card | Medicaid Card | Cash Payments |
| Dental Insurance Card | Medicare Card | Debit & Credit Cards |
| Pharmacy Insurance Card | Supplemental Insurance Card | Secondary Insurance |