Parkway Plan Physician Retainer Agreement

I. This is an agreement between the Patient and his/her Parkway Family Physician. All provisions and benefits apply to both the Patient and family members listed below.

II. The Physician Retainer Agreement provides the Patient medical services as set out in this agreement including preventive examination for a pre-set fee. The fee is posted below under the terms and conditions of this agreement.

III. The Physician, subject to the terms expressed in this agreement, agrees to provide the Patient periodic comprehensive exam which includes any indicated blood counts, blood chemistry testing, urinalysis, electrocardiograms (EKG), pap smears, stool guaiac testing and office X-Ray.

IV. The Physician, subject to the terms of this agreement, also agrees to provide additional office visits and other medical services that are indicated by the Patient’s condition which can be routinely done at the Physician’s office during normal office hours. The Patient will be entitled to receive routine immunizations including DPT, MMR, Diphtheria-Tetanus, Oral Polio, Influenza and Pneumovax. Other medications will NOT be covered. Minor surgery, simple laceration repairs and other routine procedures are provided unless, in the sole discretion of the Physician, another specialty is indicated.

V. This agreement provides only for the professional medical services of our Physician and is NOT health insurance. This agreement does NOT include the bills from other doctors or any diagnostic tests ordered by other Physicians or performed outside the Physicians office. This agreement does NOT provide payment for bills from hospitals, urgent care centers, emergency rooms, nursing homes or any medical or related expenses incurred outside of the specific terms of this agreement. This does NOT provide payment for appliances or other durable medical equipment. This agreement does NOT preclude billing for care provided in the treatment of injuries sustained in work, automobile, or other accidents where medical coverage is the responsibility of an insurance carrier.

VI. In consideration for providing the above professional services, the Patient agrees to pay the Physician ____________. The Patient agrees to follow the medical advice given by his/her Physician; the Patient agrees to make all the payments due promptly. Failure to comply with the foregoing may constitute in the sole discretion of the Physician, the basis for terminating this agreement.

VII. Additional Terms

(A) If the Patient is in default for non-payment forty (40) days after due date of such payment, this agreement is automatically terminated. In such event the Patient shall additionally, immediately owe the balance remaining under the annual retainer.

(B) The Physician may terminate this agreement if, in the sole discretion of the Physician, there is unsatisfactory Physician-Patient relationship, including patient’s failure to follow medical advice. If such termination does take place, the Patient shall then immediately owe the dollar amount of the Physician’s retainer monthly payments year-to-date to the month of termination.

(C) If the Patient changes his/her permanent residence, this agreement may, upon request of Patient, be terminated and the annual balance in full retainer shall be due and payable.

(D) If the Patient defaults for any reason or is terminated under this agreement, the Patient may NOT re-enroll in the Plan program for one (1) year from the date of default or termination, which ever occurs first.

(E) Should the Patient expire during the term of this agreement, then his/her estate will owe the balance of the Physician retainer agreement. This agreement shall be in effect for twelve (12) consecutive months from the start date and may not be modified except in writing signed by the authorized Physician and Patient. Should there arise a dispute as to the terms of this agreement or its performance, then the parties to this agreement will submit such dispute to arbitration according to the prevailing rules of the American Arbitration Association as its sole, exclusive remedy as to such dispute other than the payment of any sums of monies due from the patient to the Physician. Such determination by arbitration shall be binding on the parties with the expense of arbitration borne by the non-prevailing party.

I/We are selecting the following Plan:

[ ] Individual Parkway Plan   [ ] Family Parkway Plan

Clinic Hours: Monday – Friday 9:00 AM – 5:00 PM • Same Day Appointments Available