



GRANTS PASS FAMILY MEDICINE PC

Employer Terms and Conditions

Grants Pass Family Medicine, PC provides a direct agreement between an individual member and a healthcare provider. The Employer is not entitled to any of the employee Member's protected health information. Please review the following terms and conditions with your Employee. Enrollment in our Direct Primary Care program is optional and must be made voluntarily by the employee.

- Direct Primary Care is not health insurance. It is recommended that Employers consult their tax advisors.
- The Employer has arranged to pay the employee Member's monthly membership fee. Any fees incurred by the employee Member for services outside the scope of the Grants Pass Family Medicine, PC membership are the responsibility of the employee Member and cannot be charged to the Employer's account.
- The Employer is solely responsible for informing the employee Member at any point that the Employer is no longer paying for the service.
- The Direct Primary Care program offered by Grants Pass Family Medicine, PC includes certain listed primary care services. It does not include most lab work, scans, radiographs, blood tests, injections, hospital procedures or stays, ambulatory surgery center procedures, or other institutional stays. We recommend Members obtain high deductible insurance to supplement Member services.
- Monthly membership fees paid by the Employer are pre-paid for the entire month of service. If, for example, an employee Member is terminated and membership is discontinued, the employee will continue to have an active membership through the end of the current calendar month.
- The Employer must notify Grants Pass Family Medicine, PC prior to the monthly billing date of any changes in membership to avoid the monthly fee being processed for the next billing cycle. This is accomplished by Employer's review of enrolled employees just prior to the start of each billing cycle.
- If payment on the debit/credit card or bank account on file cannot be processed successfully we will notify the Employer immediately. The Employer will have ten (10) days to remedy the situation before termination of service.
- Grants Pass Family Medicine, PC may add or discontinue services included in the monthly fee or increase the fee schedule at any time (but no more than once annually). You will be given at least sixty (60) days' notice of fee schedule changes.
- An employee Member whose Employer chooses to discontinue payment of the monthly fees may be eligible to continue his or her membership if he or she submits an individual Payment Authorization Form with his or her own payment information.

I, _____, have read the information above and agree to these terms and conditions in providing Grants Pass Family Medicine, PC memberships to my employee Members.

Signature: _____ Date: _____

Title: _____ Company: _____