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PATIENT-CENTERED MEDICAL HOME PARTNERSHIP AGREEMENT

Dear Patient:

Welcome and thank you for choosing practice. I am committed to providing you with the best medical care based on your health needs. My hope is that we can form a partnership to keep your whole self as healthy as possible, no matter what your current state of health.

Your commitment to my patient-centered medical home practice will provide you with an expected type of care. I will work with both you and other healthcare providers as a team to take care of you. You will also have better access to me through phone and web visits and secure email.

As your Primary Care Provider, I will:

Learn about you, your family, life situation, and health goals and preferences. I will remember these and your health history every time you seek care and suggest treatments that make sense for you.

- Take care of any short-term illness, long term chronic disease, and your all-around well-being.
- Keep you up-to-date on all your vaccines and preventive screening tests.
- Connect you with other members of your care team (specialist, health coaches, etc.) and coordinate your care with them as your health needs change.
- Be available to you after hours for your urgent needs.
- Notify you of test results in a timely manner.
- Communicate clearly with you so you understand your condition(s) and all your opinions.
- Listen to your questions and feelings. I will respond promptly to you in a way you understand.
- Help you make the best decisions for your care.
- Give you information about classes, support groups, or other services that can help you learn more about your condition and stay healthy.

We trust you, as our patient, to:

- Know that you are a full partner with us in your care.
- Come to each visit with any updates on medications, dietary supplements, or remedies you are using, and questions you may have.



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- Let us know when you see other health care providers so we can help coordinate the best care for you.
- Keep scheduled appointments or call to reschedule or cancel as early as possible.
- Understand your health conditions, ask questions about your care, and tell us when you don't understand something.
- Learn about your condition(s) and what you can do to stay as healthy as possible.
- Follow the plan that we have agreed is best for your health.
- Take medications as prescribed.
- Call if you do not receive your test results with two weeks.
- Contact us after hours only if your issue cannot wait until the next work day.
- If possible, contact us before going to the emergency room so someone who knows your medical history can care for you.
- Agreed that all health care providers in you care team will receive all information relates to your health care.
- Learn about your health insurance coverage and contact your medical Insurance if you have questions about your benefits.
- Pay your share of any fees.
- Give us feedback to help us improve our care for you.

I look forward to working with you as your primary care provider in you patient-centered medical home.

Patient Signature

Printed Patient Name

Date

Parent/Guardian Signatures

Printed Parent/Guardian Name

Date