

Instructions

We understand: no one likes paperwork. Unfortunately, we do need some information and a couple of signatures before you can be treated at the Infusion Center of Pennsylvania (ICPA).

This document summarizes all the forms and agreements we might present to you.

Two Required Forms	
<p>1. Patient Information Form</p> <p>This is the basic form we use to gather information about you, especially your insurance coverage.</p>	<p>2. Medical History Form</p> <p>This form asks about allergies, other medical conditions, and drugs you are taking.</p>
Patient completes	

Optional Form
<p>O1. Authorization for Release of Information</p> <p>Authorizes ICPA to share your personal information with some third parties.</p> <p>* Available by request *</p>
Patient completes (but usually not necessary)

Two Required Agreements	
<p>3. Patient Agreement</p> <p>This is a legal agreement that allows ICPA to treat you.</p>	<p>4. Financial Agreement</p> <p>This is a legal agreement to pay for the treatment ICPA provides.</p>
Patient signs	Person financially responsible signs

Informational Document	Information and Acknowledgement
<p>5. Patient Notices</p> <p>This document contains our Notice of Privacy Practices and Patient's Rights and Responsibilities.</p>	<p>6. Benefits Estimate</p> <p>Based on what your insurance carrier(s) tell us, ICPA will complete this estimate of the cost of your treatment.</p> <p>We'll ask you to sign later (but before your appointment).</p>
No action necessary (but keep for your records)	Patient signs after ICPA completes