



Dear Prospective Patient,

We appreciate your interest in pursuing your health with us. I started this integrative medical practice intending to take exceptional care of my patients in a manner that is unfortunately rare nowadays. I hoped traditional insurance/Medicare reimbursement would adequately compensate this style of medicine. But it does not. Our integrative approach enables a more thorough and personalized disease prevention and wellness plan to be designed for you to achieve and maintain your optimal *health, vitality* and *longevity*. Unfortunately, traditional medical reimbursement does not sufficiently fund the type of personal medicine I choose to deliver. This is why the national average office visit is only 7-10 minutes. I do not wish to deliver suboptimal care to conform to current reimbursement structures. As such, I have implemented a subscription model and/or 'package' to align reimbursement with our unique medical offerings.

Providing tangible, meaningful and valuable health care is our goal. We deliver general family medicine, IV nutrition, osteopathic manipulation, homeopathy, bio-identical hormone therapy, herbal and vitamin therapy, highly useful labs, and other highly regarded services. Our goals also include short waiting room times, plenty of time spent with the doctor, relaxing ambience, quick appointments for established patients, on-site access to supplements, and convenient in-office lab draws. We facilitate extremely comprehensive labs as needed that are of tremendous value. Most of all, we strive to heal in a healing environment.

Delivering this level of personal care and wellness solution offerings requires that we limit the number of patients we can serve. Insurance and Medicare reimbursement, however, are designed to provide relatively modest fees for numerous interventions. This mandates a large patient pool with abbreviated patient interactions. Reimbursement has decreased over the years while costs have increased, and now only cover "medically necessary" treatment. Integrative/holistic treatments are typically not covered.

We believe that extraordinary personal wellness beyond what insurance plans or Medicare can or will cover is made possible with patient subscriptions and/or 'package' commitments funding the delivery of these healing services. Therefore, we have implemented these fee structures.

Please consider that while some Health Savings Accounts or Flexible Spending Accounts may not cover monthly subscription fees, some do when the fee is paid annually or for a 'package'.

Our subscription or 'packages' are quite modest when compared to what most folks pay for a daily cup of Starbucks coffee, or cable television, or cell phone monthly subscription fees and when compared to the potential health gained with our medical guidance. We hope you prioritize this investment in your health.

This subscription and/or 'package' fee(s) covers services that are not covered by your insurance or Medicare: time spent during office visits beyond what is deemed "medically necessary," e-mails and telephone calls related to patient education, prescription changes handled outside of an office visit, forms assistance, health coaching, periodic e-mailed health newsletter or blogs or videos, on-site supplements, and many other additional services not mentioned here and that are ever expanding.

You will be given my cell phone to be used in urgent after-hour situations. Emergencies always require you to call 911 or visit your nearest Emergency Room. I will continue to be on-call 24-7 with the exception of when I am at a medical conference or on vacation when a capable physician will cover for me. In order to deliver this version of highly personal care, my patient panel will be limited to no more than 250 subscribing patients. The average medical doctor has a patient panel of 2,500 – 3,000 people and many have patient panels upward of 6,000 people which makes you just one of very many faces, and forces physicians to practice *reactive* care (sick care) instead of *proactive* care (preventive and wellness care).

With our country's inefficient health care system and reimbursement structure that rewards *reactive* care (sick care) but not *proactive* (wellness care), the subscription and/or package fee enables us to provide you the exceptional healing integrative care you deserve. Through this practice model, we commit to taking the time and resources needed to optimize your health.

Please know that I will treasure being a part of your life's journey and I hope with all my heart to work with you in our quest toward optimal health.

To Health!

Yoshi Rahm, D.O.

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OASIS FAMILY MEDICINE INC.
Yoshi Rahm, D.O.

Patient Agreement

Patient consent for Treatment

Patient authorizes Dr. Yoshi Rahm, D.O., to provide Patient with medical services, specifically integrative and holistic medical services that are distinct from conventional allopathic medicine.

Payment Assignment and Financial Responsibility

Payment is due upon receipt of services at Oasis Family Medicine Inc. (“Medical Practice”) for those without a Medicare health insurance plan and for those who do have a Medicare health insurance plan but are choosing to receive services not covered by their Medicare health insurance.

For those with Medicare health insurance, patient authorizes Patient’s Medicare Health Insurance Plan (“Medicare”) benefits to be paid directly to Medical Practice. Patient agrees to pay any required co-payments at the time of service. Patient also understands that Patient is responsible for payment of any required co-insurance or any services not covered by Patient’s Medicare.

Holistic Surcharge Amenities Fee for those with Medicare

Dr. Rahm, practicing medicine for Medical Practice offers the following Holistic Surcharge amenities not covered by Medicare:

- Holistic/integrative health consults, tests, and services beyond any applicable Medicare Health Insurance Plan (“Medicare”) both in scope and frequency, and regardless of apparent initial condition. In other words, we engage in proactive testing and analysis before a medical condition arises, and before a diagnosis, with integrative/alternative medical approaches not reimbursed by Medicare coverage;
- Online/telehealth/e-health services that are beyond Medicare coverage, and to help the Patient support self-care behavior modifications to improve health;
- After-hours electronic communication evaluation and management to provide ongoing educational communication support, but specifically excluding electronic communication related to office visit scheduling, or following-up on an office visit, or telehealth services covered by Medicare or based on emergent medical needs;
- Medical services delivered via an electronic communication portal while Patient is traveling outside the US;
- Periodic health/wellness educational newsletters, and/or blogs, and/or videos;
- Access to specialty laboratory test kits on site that is/are beyond any applicable Medicare coverage;
- Access to supplements on site with related guidance;
- Access and/or use of health coaching and/or device or technology services beyond any applicable Medicare coverage.

All of the above are collectively our Medical Practice “Holistic Surcharge Amenities” (“Holistic Surcharge”) covered and compensated by our **Holistic Surcharge fee that is paid in addition to any applicable insurance fees and co-payments**. In no event shall our Holistic Surcharge cover or pay for any medical services covered by Medicare. Patient must never submit to Medicare a request for reimbursement for the Medical Practice Holistic Surcharge.

Medical Practice reserves the right to charge Patient reasonable fees for IV nutritional therapy that is not covered by Medicare.

In no event shall Holistic Surcharge be deemed to include “access” to Medical Practice, abbreviated scheduling or extended office visits, “care coordination” with other physicians, emergency medical services, or “24/7” communication access (other than as specified above). The delivery of any of these Holistic Surcharge Amenities may potentially occur incidentally and all medical services covered by Medicare shall be billed to Medicare.

In ADDITION to any Medicare co-payments, co-insurance, deductible, the Holistic Surcharge fee is decided by the Medical Practice and the Patient and is one of the following options and may change as appropriate Medical Practice and Patient are in mutual agreement:

1) Annual/Monthly Fee

- Individual or 2nd member of a family: \$3,289 due annually, or \$299 due on the 1st of each month.
- 3rd or subsequent member of a family: \$1,639 due annually, or \$149 due on the 1st of each month (per individual). This family discount applies to current patient’s children who are 25 years or younger living in the same household.
- Note: First month or annual fee payment will be prorated appropriately.

2) Package Fee

- The most updated package fee(s) may be obtained from office staff.

3) Per office visit fee

- Each office visit where doctor spends **20 minutes or less with patient: \$395.**
- Each office visit where doctor spends **greater than 20 minutes with patient: \$695.**

All questions regarding fees should be directed to office staff before any services are scheduled and/or rendered and is sole discretion of the Patient to know before any services are scheduled and/or rendered.

Medical Practice participation is personal to each individual accepted into the Medical Practice, and may not be assigned. The Medical Practice reserves the right to adjust any fees at any time. Either party may terminate participation in the Medical Practice with thirty (30) days written notice. The Medical Practice may terminate this Agreement at any time should Patient fail to timely pay billing statements for health care services provided, or violate Medical Practice policies or instructions communicated to Patient.

Credit Card on File

The Medical Practice has several payment options for Patient’s convenience, including cash, credit card, or check (made payable to Oasis Family Medicine Inc). However, Medical Practice does **require a valid credit card to be kept on file at all times.**

The Patient agrees to fill out a separate “Credit Card Authorization” form that authorizes the Medical Practice to charge for any of the following fees: annual or monthly; package fees; any/all Holistic Surcharge Amenities; missed (non-cancelled) appointments, emails/phone calls, co-payments, co-insurance or overdue bills, as well as any other charge incurred at the Medical Practice, to the referenced credit card until such authorization is revoked by Patient or this Agreement is terminated. Patient may elect to authorize additional billing fees for professional services from the above-referenced credit card.

The credit card or debit card information will be stored in a secure HIPAA compliant manner.

Some health care services provided by the Medical Practice may not be covered by Patient’s Medicare. Patient will be solely financially responsible for those charges. Patient will be financially responsible for all co-payments, co-insurance and deductible amounts under Patient’s Medicare. Patient will be billed immediately upon service and credit card charged within ninety (90) days of such billing for (1) any fees not collected at the time of health care service; 2) co-insurance and deductibles for Medical Practice health care services provided; and 3) charges for health care services provided not covered by Patient’s Medicare. If the Medical Practice is out-of-network for Patient’s Health Insurance Plan, the Medical Practice will provide Patient a billing document (i.e. a “superbill”) outlining medical services provided to Patient that Patient may submit to Patient’s Health Insurance Plan. If Patient has an out-of-network Health Insurance Plan the Medical Practice may choose to courtesy bill for the Patient on an individual basis. In no event, however, may Patient submit any portion of the Holistic Surcharge Medical Practice fee(s) to Medicare.

The Medical Practice Holistic Surcharge fee is a fee charged for Patient to secure certain amenities not covered by Medicare. Patient shall be financially responsible for the Medical Practice services covered by the Holistic Surcharge fee as well as all Medical Practice services that are not covered by the Holistic Surcharge fee. Under no circumstances shall the Medical Practice charge Patient personally for any health care services covered by Medicare.

Patient's enrollment and participation in the Medical Practice shall be completed with the execution of this Agreement. This Agreement shall be governed by the laws of the State of California without application of choice-of-law principles. This Agreement replaces and supersedes all prior agreements between Patient and the Medical Practice. This Agreement may not be modified absent a writing signed by Patient and an authorized representative of the Medical Practice. If any term of this Agreement is deemed invalid or in violation of any superseding law or policy, the remaining terms of this Agreement shall remain in full force and effect.

Signature of Patient/Legal Guardian/Legal Representative

Date

Print Patient's Name

Patient's Date of Birth

Print Name of Legal Guardian

Relationship to Patient

This notice was first published and became effective on September 15, 2011.
This notice was revised on August 1, 2013.
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