

Stone Creek Family Medicine

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ANNUAL FEE

To our patients:

Several years ago, Stone Creek Family Medicine implemented an annual fee to cover services not covered by insurance companies or our routine office visit fees. This payment is due at the time of your first visit of any calendar year/or by phone if one of the listed services is completed after one year outside of an office visit and will not be billed. This is not a membership or concierge medicine fee. A special receipt will be provided to those who have health savings accounts or other resources which will reimburse for the fees. The following services are included in those covered by this fee:

- Unlimited access to our “patient web portal”;
- Prescription refills via telephone or web portal;
- Telephone calls;
- Billing issues / fees;
- Postage fees;
- Form completions;
- Insurance letters / forms; and
- Many other tasks our staff and doctors handle on a daily basis that are not covered by insurance plans.

Our “patient web portal” provides a 24- hour non-emergency online communication system between the patient and our office. Prescriptions can be ordered at any time via the portal for our patients’ convenience. You can access lab results and physician comments or instructions immediately when your doctor has reviewed them. We also have implemented e-Prescribing, which is a direct communication system with your pharmacy for improved medication/prescription efficiency. Please log onto our website* for more information.

The Annual Fee is due at the beginning of the calendar year and is paid once per year. **This is a non-refundable fee.** The cost is:

- \$75.00 per person
- \$125.00 per family (patient/spouse/dependent children 21 or under)

If you have any questions regarding this fee, please ask us during your office visit or as mentioned above, sign onto the website and see the “annual Fee Frequently Asked Questions” flyer. Our website can be accessed at [*www.stonecreekfamilymedicine.com*](http://www.stonecreekfamilymedicine.com) at any time. Before you leave our office today, please ask the staff to activate your web portal and provide you with a user name and password.

Thank you for allowing our doctors to provide your medical care. We will continue to strive to provide you with the most current and progressive medical treatment available in family practice.

Name (Please Print): _____

Date: _____

Signature: _____