

New Patient Packet

Demographics

1. Please enter the patient's information.

First (legal) Name: _____ Middle Initial: _____ Last Name: _____ Date of Birth: _____ Gender:
 Female
 Male

Street Address: _____ Apt./Unit #: _____ City: _____ State: _____ Zip Code: _____

Mobile Phone: _____ Home Phone: _____ Work Phone: _____

Email: _____ Social Security Number _____ Preferred contact method:
 Mobile Phone Home Phone
 Work Phone Messaging Portal

2. Emergency Contact: _____ Relationship: _____ Phone: _____

3. Primary Care Physician: _____ Phone: _____

Pharmacy: _____ Phone: _____

4. Who referred you to PGA?

PCP. Self. If other, who referred you? _____

5. Do you have a living will?

Yes . No

6. Primary Insurance

Primary Insurance Company _____ Member ID / Policy # _____ Group Number _____

Client Relationship to Insured
 Self Spouse Child Other

Insured Name _____ Insured Phone # _____ Insured Date of Birth _____ Insured Gender
 Female Male

Insured Street Address _____ Insured City _____ Insured State _____ Zip Code _____

7. Secondary Insurance

Secondary Insurance Company	Member ID / Policy #	Group Number	
Client Relationship to Insured <input type="radio"/> Self <input type="radio"/> Spouse <input type="radio"/> Child <input type="radio"/> Other			
Insured Name	Insured Phone #	Insured Date of Birth	Insured Gender <input type="radio"/> Female <input type="radio"/> Male
Insured Street Address	Insured City	Insured State	Zip Code

8. Medicare, as well as private insurance companies, like Highmark Blue Cross/Blue Shield, do not necessarily pay for all of your health care costs; coverage varies from plan to plan. Insurers only pay for "covered items" and services that they determine are "reasonable and necessary." The fact that your insurance may not pay for a particular item or service does not mean that you should not receive it. There is a good reason why your doctor has recommended it. Many insurers do not pay for screening or preventative care. Some companies do not cover consultations. You may need to make a choice about receiving a service, and possibly personally assuming responsibility for payment.

Our practice follows strict standards of care as recommended by the national gastroenterology specialty societies and complies with all Medicare and insurance billing policy guidelines. The Customer Service Department of your insurance company can advise you about what may or may not be covered. Our billing department can answer any questions you might have concerning fees or setting up payment plans. They can be reached at 412-232-8104 between 9:00 and 3:00 PM.

Please call 48 hours in advance if you are unable to keep your appointment so that we may make this time available to others. If you do not notify us in a timely manner, you may be charged for the appointment. Thank you for your assistance and for the privilege of participating in your care. Please do not hesitate to contact our office with any other questions or concerns.