



## SERVICES AVAILABLE

- **Medical:** which includes Primary & Preventive Care, Pediatric Care, Women's Health, Physical Exams, Immunizations, Lab tests, etc.
- **Dental:** which includes Preventive & Basic Restorative Dental Care such as fillings, crowns, extractions, dentures & partials
- **Behavioral Health:** which includes Mental Health Assessment, Crisis Prevention & Intervention, Individual & Group Counseling, Family Counseling & Support, Medication Management

**MISSION:** To provide open access to quality patient centered healthcare in the communities in which we live.

**VISION:**  
For all residents of the PCPFHF service areas to have access to affordable quality health and wellness services, enabling them to achieve quality of life for themselves and their families.

**VALUES:**  
-INTEGRITY in the management and delivery of services.  
-EXCELLENCE in personal and organizational performance  
-EMPOWERMENT of patients to make healthy lifestyle choices  
-RESPECT for the uniqueness and individual differences to all whom we serve



Welcome to RKM Primary Care. We are honored that you have chosen us as your health care provider. Our goal is to provide the highest quality care for all our patients in a timely and respectful manner.

We will do our best to provide you with same-day office visits and accept walk-ins for first available slots for all sick visits. You will need to bring your insurance card and a photo ID with you. You will be asked to fill out new registration forms annually so we may update your information. Please let our staff know if you have had any information changes since your last appointment.

Payment is expected at the time of service unless a prior agreement has been made with our billing department.

#### Appointments:

We ask that you allow plenty of time to get to the office for your appointment. You may be asked to reschedule your appointment if you are more than 15 minutes late. We will strive to stay on time. From time to time, a patient emergency arises, and we may be running late for your visit. You will have the option to reschedule or stay to be seen and we will keep you informed of how long of a delay you may experience.

We understand that appointments sometime need to be changed, so we ask that you call in advance if you cannot keep your scheduled appointment.

#### Medications:

Please bring all your prescription and over-the-counter medications with you for each visit.

Providing the highest quality of professional care to our patients is very important to us. Therefore, the following guideline for prescribing medications in our office has been established.

1. RKM Primary Care does not treat chronic pain with controlled substances (for example, narcotics). We will provide you with a referral to a pain management center if you need this specialized form of care after evaluation by our providers.
2. If you are on a medication that requires refills for a chronic disease (for example, high blood pressure or diabetes), you will be given ample refills as agreed upon by you and your provider.
3. When you are down to zero refills and have 3 to 4 weeks before your bottle is empty, we ask that you call and schedule your follow-up office visit to be evaluated and have your medications adjusted or refilled. We ask that you allow enough time for us to make an appointment so you're not without your medication.
4. No refills or new medications will be called in over the phone after office hours by the on-call provider.

Once again, welcome to our clinic and thank you for choosing RKM Primary Care for all your health care needs. Should you have any questions, please do not hesitate to contact us at 888-RKM-4You.

# What Is a Patient-Centered Medical Home (PCMH)?

**It's not a place... It's a partnership with your primary care provider.**



PCMH puts **you** at the center of your care, working with your health care **team** to create a **personalized plan** for reaching your goals.

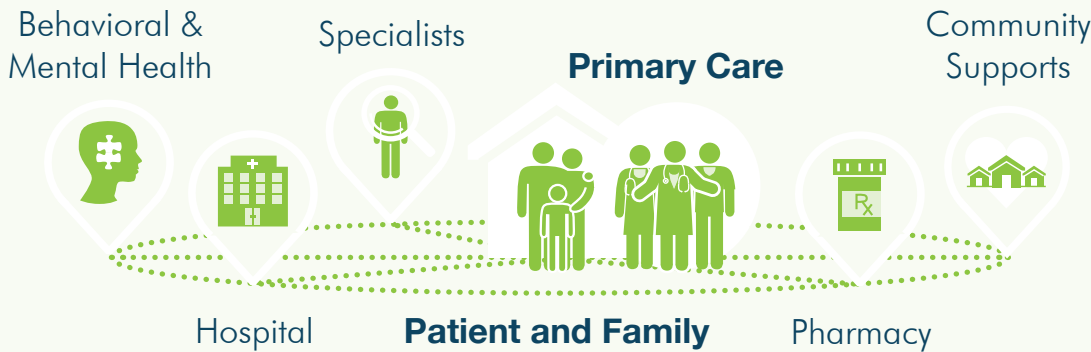


Your **primary care team** is focused on getting to know you and earning your trust. They care about you while caring for you.



Technology makes it easy to get health care when and how you need it. You can reach your doctor through **email**, **video chat**, or after-hour **phone calls**. **Mobile apps** and **electronic resources** help you stay on top of your health and medical history.

**As you pursue your health care journey, you may make stops at different places:**



Wherever your journey takes you, your **primary care team** will help guide the way and coordinate your care.

**Studies show that PCMH:**



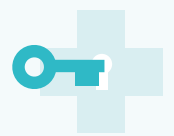
Provides better **support** and **communication**



Creates **stronger relationships** with your providers

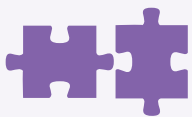


Saves you **time**



To learn more about the PCMH, visit [www.pcpc.org](http://www.pcpc.org)

**A Patient-Centered Medical Home is the right care at the right time. It offers:**



**Personalized care plans** you help design that address your health concerns.



**Medication review** to help you understand and monitor the prescriptions you're taking.



**Coaching and advice** to help you follow your care plan and meet your goals.



Connection to **support and encouragement** from peers in your community who share similar health issues and experiences.



### **Patient Rights and Responsibilities**

The patient has the right:

- To Not be discriminated against because of age, race, color, national origin, ethnicity, religion, culture, language, mental or physical disability, ability to pay, socioeconomic status, sex, sexual orientation, and gender identity or expression.
- To receive respect for their cultural and personal values, beliefs, and preferences.
- To effective communication, including the services of an interpreter or communication aid if needed if they do not speak English, English is their second language, or they are deaf, hard of hearing, have speech disabilities or literacy issues.
- To be treated with courtesy, dignity, and respect by all clinic staff.
- To know the identity and professional status of all individuals involved in the plan of care.
- To receive complete and current information about their condition that relates to the care provided in a manner tailored to their age, language, and ability to understand.
- To receive care in a safe setting free from neglect, exploitation, and verbal, mental, physical, and sexual abuse.
- To be informed about the nature and purpose of any clinical procedures that will be performed, including information about both the potential benefits and risks.
- To involve patient's family in care, treatment, or service decisions to the extent permitted by the patient or designated decision-maker, in accordance with law and regulation.
- To designate a decision-maker for their care.
- To have patient and/or designated decision-maker make an informed choice concerning healthcare treatment procedures and options.
- To have patient and/or designated decision-maker refuse any of their care to the extent of the law and will be informed of any consequences of refusal. PCPFHF will honor the patient's right to give or withhold informed consent.
- To receive outcomes of care, treatment, or services that the patient needs to participate in current and future health care decisions.
- To be informed about unanticipated outcomes of care, treatment, and services.
- To personal privacy, case discussion, consultation, examination, and treatment provided in a manner to protect each patient's privacy.
- To consent or deny photographic, video, digital, electronic, or social media.

- To have access to, request to make amendments to, and obtain information on disclosures of health information in accordance with applicable law.
- To obtain care from other providers of the patient's choosing within the primary care medical home.
- To a second opinion of the patient's choosing, at patient's expense.
- To seek specialty care, at patient's expense.
- To not receive experimental treatment or participate in research unless they give documented voluntary informed consent.
- The patient has the right to be informed of any education activities related to their care such as care given or observed by students.
- To have complaints reviewed by the organization and, when possible, have those complaints resolved.

#### Patient Responsibilities:

- To provide, to the best of their knowledge, accurate information about present complaints, past illnesses, hospitalizations, medications, and other matters related to their health.
- To provide the organization with information about their expectations of and satisfaction with the organization.
- To ask questions when they do not understand their care, treatment, or services or what they are expected to do.
- To follow their plan of care, treatment, or services and participate in self-management.
- To express any concerns about their ability to follow the proposed plan of care, treatment, or services.
- To accept their share of responsibility for the outcomes of care, treatment, or services if they do not follow the care, treatment, or services plan.
- To follow the organization's policies and procedures.
- To be considerate of the organization's staff and property, as well as other patients and their property.
- To keep your appointments. If you are unable to keep your appointment, please notify the clinic as soon as possible.
- To meet any financial obligation agreed upon with the organization.

# TELL US ABOUT YOUR EXPERIENCE!



<https://rkmcare.org/patient-satisfaction-surveys/>

**RKM PRIMARY CARE**  
THE RIGHT CARE, CLOSE TO HOME

# **RKM** PRIMARY CARE

THE RIGHT CARE, CLOSE TO HOME

The first step to addressing a complaint is to speak directly to the person involved. Discuss your concern with your provider. Ask to speak to the Practice Manager. If your concern is not satisfactorily addressed at the clinic level, then leadership needs to be informed. There are several ways to report a complaint:

- In writing, by mail or placement in lock box at clinic
- Electronically by e-mail or patient portal
- By phone to discuss your concern personally
- Contact us on the RKM website

When reporting a concern/complaint, please provide sufficient detail for proper follow-up. If you want feedback on findings and any action taken, then you must provide contact information.

Concerns that significantly affect safety or quality of care can be reported as follows:

- At [www.jointcommission.org](http://www.jointcommission.org), using the “Report a Patient Safety Event” link in the “Action Center” on the home page of the website.
- By fax to 630-792-5636.
- By mail to The Office of Quality and Patient Safety (OQPS), The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181.

**HAVE A CONCERN  
OR COMPLAINT?**

Not satisfied with  
the care provided

Unhappy with staff  
interaction

Lack of  
information

If so, we want to  
know.

Completing the  
Satisfaction  
Survey, during  
your visit, also  
allows us to  
improve our care.

**CONTACT:**

Quality Support  
(225) 683-5292 x10047

[QSSmanager@RKMcare.org](mailto:QSSmanager@RKMcare.org)

11990 Jackson St.  
Clinton, LA 70722