



Texas Gulf Coast Project Access

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Patient Responsibilities Agreement

The **Gateway to Care Texas Gulf Project Access (TGCPA)** is a program to improve access to healthcare for low income, uninsured citizens of the Greater Houston Area. Physicians, hospitals, area clinics, laboratories, drug companies, pharmacists and many others volunteer their services to help you get well and stay well. TGCPA is not an insurance plan, and we do not pay these professionals for their services to you. It does not cover emergency room expenses, ambulance, or most medical supply services.

Your responsibilities under this program, the assistance available and other conditions of the program may change at any time. We reserve the right to check what you have told us and to require that you pay for any assistance you may have received because of incorrect information. You will be terminated from the program if we find you intentionally misrepresented information or if you do not comply with the responsibilities listed on this form.

My responsibilities as a client of the Texas Gulf Coast Project Access:

1. I give permission to TGCPA to share my medical information with other health professionals in order to coordinate my care.
2. I will notify the TGCPA Health Navigator of any change in my address, phone numbers, financial eligibility, or any other information about my case. If I do not notify TGCPA within 4 weeks of any change, TGCPA may remove me from this program.
3. I will apply for Medicaid or other assistance if the TGCPA asks me to apply.
4. I will call the TGCPA Health Navigator before and after every appointment.
5. I will call the TGCPA Health Navigator immediately if I make a follow-up appointment with the doctor.
6. If the doctor says that I need additional services from another doctor, or that I need diagnostics, lab work, or any other service, I will ask the doctor's office to call the TGCPA Patient Care Coordinator.
7. If I receive a bill for services that were arranged by TGCPA, I will call the TGCPA Health Navigator immediately.
8. I will be responsible to pay for services that were NOT arranged by TGCPA.
9. My eligibility for this program will end 6 months after the date of enrollment. If I need to extend my enrollment, I will call the TGCPA Health Navigator at least one month before my enrollment ends.

My responsibilities as a patient:

10. I will have a health home – a primary care doctor or clinic. If I need a primary care doctor, I will ask Gateway to Care to help me find one.
11. I will see my health home doctor or clinic at least one time during my enrollment in the program.
12. I will not use a hospital emergency room unless I have a true emergency. If I am not sure if I need the emergency room, I will call my primary care doctor or clinic. I understand that I am responsible for paying for

any emergency room services. If you have any questions regarding health issues related to your surgery, please contact your surgeon, or the Nurse Health Line (713-338-7979).

13. If I cannot keep an appointment, I will call the TGCPA Health Navigator at least 48 hours before the time of the appointment. I understand that some doctors may charge me a fee if I miss an appointment.
14. If I miss two appointments, I understand that TGCPA may remove me from this program.
15. I will not use disruptive, aggressive or abusive actions or speech. I understand that all the services I receive through TGCPA are donated, and TGCPA may end my enrollment at any time because of such behavior.
16. I will write a letter or participate in a video telling TGCPA what it means to receive this medical care. Please send this letter with the application.

My responsibilities with my prescriptions:

TGCPA can sometimes help with filling prescriptions, but this depends on the kind of medication and the resources available. Usually, this help is only for short term medications, or to get started on a monthly medication routine (for example, for high blood pressure or diabetes). There is no guarantee that the PHN can help with the specific medications that a patient needs. Even if a patient gets prescription assistance, it may take 6 to 8 weeks to begin receiving medications.

17. I will follow my treatment plan. I will fill my prescriptions and take medications according to my doctor's instructions.
18. If my primary care doctor or clinic has free or low-cost medications, I will use those first. If my doctor does not have free or low-cost medications, I will call the TGCPA Navigator for advice.
19. I may be eligible for a Pharmacy Assistance Program (PAP) that can help me get low-cost medications, but I understand that there is no guarantee that the PAP can help me with the specific medicines I may need. I will ask the TGCPA Navigator for help in applying for a PAP.
20. I will ask for help with prescriptions only for medications that are prescribed for me. I will not use TGCPA or PAP for prescriptions that are not mine.
21. I will not allow anyone else to use my prescribed medications.

I understand that if I do not comply with this agreement, the Texas Gulf Coast Project Access may terminate my enrollment. If this happens, I will not be able to apply for enrollment again until a year after that termination.

Patient name (please print)

Patient signature

Date of Birth

Today's date

Please sign, make a copy for you to keep, and return the original to Gateway to Care Texas Gulf Coast Project Access. For Questions please call TGCPA Navigator @ (832)922-0972