CONSOLIDATED PATIENT CONSENT TO CARE

Premier Medical Group LLC | Gastrointestinal Institute LLC

We are committed to providing convenient, coordinated, and high-quality healthcare services. Please review the following standard authorizations regarding your treatment, digital connectivity, and care management models.

1. Medical Care & Treatment

You authorize our physicians, advanced practice providers, nurses, care managers, and authorized clinical staff to provide medically appropriate diagnostics, care, and treatment paths.

- **Scope:** Includes comprehensive office visits, preventive healthcare measures, clinical follow-up, chronic disease management protocols, prescriptive medication updates, and system-wide care coordination.
- **Outcomes:** While clinical teams strive to deliver optimized outcomes aligned with standard medical excellence, no specific diagnostic or therapeutic result can be legally guaranteed.

2. Virtual Care & Online Communications

To maximize convenience, select healthcare delivery may be conducted via video platforms, telephonic checks, active patient portals, or secure digital channels.

- **Billing Policies:** Digital or telephonic communications requiring standard medical record reviews, programmatic clinical decisions, or official electronic documentation may be submitted directly to insurance networks, incurring patient deductibles or co-insurance variables based on your carrier guidelines.
- **Administrative Processing:** Standard organizational communications (e.g., standard scheduling parameters, general information requests) remain entirely unbilled.
- **Clinical Suitability:** Remote medical evaluation remains conditional on situational clinical criteria. Providers reserve the right to mandate direct in-person evaluation when medically necessary.

> ⚠️ **EMERGENCY NOTICE**
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> Patient networks, text delivery, email queues, and standard virtual modalities are completely unsuited for urgent healthcare events. If you suffer a sudden or critical medical event, immediately contact 911 or report to the nearest emergency facility without delay.

3. Digital Communications Framework

By registering active personal contact information, you explicitly authorize our clinics to contact you across the following standard mechanisms for operational and clinical outreach:

Authorized Delivery Systems	Operational & Clinical Functions
• Interactive Voice Response & Voicemail • Secure Text Messages (SMS)	• Time-sensitive appointment and preventive warnings • Diagnostic testing summaries & follow-up plans

• Secured Electronic Mail (Email) • Authenticated Patient Portal Environment	• Prescription renewal and compliance indicators • Chronic disease support & transitional workflows • Statements, billing modifications, and insurance verification

Note: Patients maintain a continuous obligation to alert front-office administrators of changes to contact channels.

4. Principal Care Management (PCM)

Qualified individuals suffering from complex conditions may be offered voluntary enrollment within dedicated Principal Care Management programs to bridge care gaps between standard clinical assessments.

- **Voluntary Framework:** Program participation remains optional. Enrolled patients reserve the right to withdraw participation completely at any time through verbal or written staff notification.
- **Financial Mechanics:** PCM operations are submitted to insurance only where compliant with specific plan policies, remaining subject to standard co-payments or annual deductibles.
- **Exclusivity Guidelines:** Federal guidelines restrict active monthly PCM enrollment to a single specific practitioner or designated clinical entity at one time.

5. Confidentiality & Financial Responsibility

🔒 Information Privacy Protocols

Patient health records are protected and shared exclusively under governing statutes for necessary treatment steps, clear payment processing, internal facility assessments, and cross-facility care alignment. Patients hold continuous access to our comprehensive *Notice of Privacy Practices* detailing these protections.

💳 General Financial Responsibility

Patients retain direct accountability for all remaining outstanding balances unfulfilled by third-party health plans, controlled by network rules and regulatory exceptions. Due to clinical documentation guidelines, physical visits, telehealth consults, portal review matrices, and PCM systems appear as distinct professional services on statements.

If you have questions regarding any portion of these provisions, please speak with an institutional representative prior to execution. Thank you for choosing us as your healthcare partner.