

## AFC CARE CLUB MEMBERSHIP AGREEMENT

### 1) PROGRAM :

This Membership Agreement describes the services provided through HYGEIA, LLC and explains how you may purchase membership. It summarizes the terms and conditions of your membership. By electing to purchase membership in our AFC CARE CLUB program, you are ensuring you and/or your family have same day access to urgent care services 362 days/year at 4 conveniently placed facilities in the Portland, Oregon area.

**AFC CARE CLUB is not insurance. All services provided by the Retainer Medical Practice cannot be billed to insurance.**

The practice provides only the limited scope of primary care services specified in the AFC CARE CLUB membership agreement.

A patient must pay for all services not specified in the AFC CARE CLUB membership agreement.

#### *AFC CARE CLUB Cancellation Policy*

*An individual member who has not used any of AFC Urgent Care services can cancel at any time with written notice. An individual who has only had one (1) visit at AFC Urgent Care can cancel his/her membership after six (6) months with written notice.*

*A Member Family who has not used any of AFC Urgent Care services can cancel their membership at any time with written notice. A family who has only used two (2) visits with AFC Urgent Care may cancel their membership after six (6) months with written notice.*

*AFC Urgent Care may cancel an individual or family AFC CARE CLUB Membership ten (10) business days following notification of failure of a credit or debit card transaction*

The Department of Consumer and Business Services issued a certification to this practice. You can contact consumer advocates at the Department of Consumer and Business Services at (888) 977-4894, [dcbs.insmail@state.or.us](mailto:dcbs.insmail@state.or.us), or [www.insurance.oregon.gov](http://www.insurance.oregon.gov)."

## 2) SCOPE OF SERVICES COVERED BY THIS AGREEMENT:

Hygeia, LLC agrees to provide the following services and amenities to AFC Care Club members:

- Experienced and dedicated staff committed to a high level of care and service
- Same day access to Urgent Care services.
- No appointment is needed and online check-in is always available
- Many locations to serve you - Lake Oswego, Northwest Portland, Northeast Portland, and Beaverton Locations.
- Individuals receive four (4) visits per calendar year
- At each visit the patient is expected to pay a facility fee of \$10.00
- Family plans are also available. These plans include the head of household and up to three (3) additional dependents or up to four (4) total family members.
- Families receive seven (7) visits per calendar year. Family member visits are in aggregate and could all be used by the same family member or divided among different family members. Seven visits is the yearly family limit.

- **All other Urgent Care services are discounted 50% for AFC CARE CLUB members. Examples of services included:**

- All in-house x-rays
- All in-house Laboratory testing
- All Procedures such as suturing of wounds, foreign body removals, drainage of boils and abscesses
- All injections and injected medications
- All wound care and dressings
- Ear Lavage (Cleaning)
- Breathing treatments
- EKG
- IV fluids
- Spirometry
- See pages 5 - 7 of the contract for specific procedure pricing

A full list of all covered services and member prices is attached and available on our website.

- Annual flu shot is free of charge for individuals and each member of a family plan (does not count as a visit)
- Monthly newsletter with membership updates and health and safety information

**\*\*Please note:**

**Urgent Care services are not an appropriate place to manage chronic illness such as diabetes, hypertension, COPD, congestive heart failure, depression or chronic pain. If you have a chronic illness, our urgent care provider may or may not be able to treat you but will certainly be able to refer you to a primary care provider (in our practice or another practice) or an appropriate specialist.**

**3) MEMBERSHIP PAYMENT:**

For the above services and amenities, cost for individual Members will be \$40.00 per month with payment made by ACH with a valid credit or debit card. Cost for a family (including spouse/domestic partner and dependents) will be \$65.00 per monthly ACH payment. At each visit the patient is expected to pay a facility fee of \$10.00. A one time fee for processing the application charged at a cost of \$20.00 for either the Individual or family membership. This will be a one time fee except in cases where the membership lapses. In the case that a membership lapses, a reapplication fee and the first month's payment will be required to reactivate the membership. The first two months' fees, as well as the one-time processing fee, are due at sign-up.

**4) TERM and MONTHLY PAYMENTS:**

The membership period is one year from the initial contract date. A membership renewal reminder will be sent out in the last quarter of the membership year. Membership will automatically be renewed during the last month of the membership year for the following year. Termination of the AFC CARE CLUB membership must be made by the patient in writing and must be received 60 days in advance of the annual contract renewal date. Members may also change their preferred form of payment by giving 60 days notice. Membership will be effective at date of application upon completion and review of the Membership application/ACH authorization form, completed first and second month's payment and application fee. Subsequent monthly payments will continue by automated credit or debit transaction. Should the transaction fail, the Member will be notified by email and will be solely responsible to correct the reason for transaction failure. The Member will not be charged a reapplication fee if the error is corrected within ten (10) business days from date of email notification of credit/debit transaction failure; but a failed credit card fee (\$25.00) will be charged for each failed credit card transaction.

**5) CANCELLATION/REINSTATEMENT:**

An individual member who has not used any of AFC Urgent Care services can cancel at any time after their initial contract start date with written notice. An individual who has only had one (1) visit at AFC Urgent Care can cancel his/her membership after six (6) months from the initial contract date with written notice.

A Member Family who has not used any of AFC Urgent Care’s services can cancel their membership at any time with written notice. A family who has only used two (2) visits with AFC Urgent Care may cancel their membership after six (6) months with written notice.

AFC Urgent Care may cancel an individual or family AFC CARE CLUB Membership ten (10) business days following notification of failure of ACH transaction.

After ten (10) business days, the patient’s membership which has been canceled for this reason by AFC Urgent Care may be reinstated with a valid credit or debit card entry and the payment of a reinstatement fee of \$25.00.

In the event that a member cancels their membership and has utilized one (1) or more visit(s), or, if a member family has used two (2) or more visits they will be responsible for 6 months membership dues minus any monthly dues already paid by member.

In the event that a member cancels their membership and has utilized two (2) visits, or, a member family has used three (3) or more visits they will be responsible for 12 months membership dues minus any monthly dues already paid by member.

In the event that AFC Urgent Care is unable to provide services as promised for any reason, AFC Urgent Care will refund monthly membership fees back to the patient or family retroactively to the first day of the month in which AFC Urgent Care was unable to provide services as promised. The refund will be processed no later than 90 days from the date that AFC Urgent Care Could not provided services as promised.

I have read and accept the terms and conditions of the AFC CARE CLUB Membership Agreement

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_

Practice Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>AFC CARE CLUB MEMBER PRICE SHEET</b>			
<b>X-RAYS</b>	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
ABDOMEN	74022	\$87.00	\$43.50
ANKLE	73610	\$80.00	\$40.00
CERVICAL	72040	\$104.00	\$52.00
CHEST (1VIEW)	71010	\$65.00	\$32.50
CHEST (2 VIEW)	71020	\$90.00	\$45.00
CLAVICLE	73000	\$61.00	\$30.50
COCCYX/SACRUM	72220	\$106.00	\$53.00
ELBOW	73070	\$58.00	\$29.00
FEMUR	73550	\$61.00	\$30.50
FINGER	73140	\$61.00	\$30.50
FOOT	73620	\$65.00	\$32.50
FOREARM	73090	\$58.00	\$29.00
HAND	73130	\$65.00	\$32.50
HIP	73510	\$78.00	\$39.00
HUMERUS	73060	\$70.00	\$35.00
KNEE	73562	\$90.00	\$45.00
LUMBAR	72100	\$90.00	\$45.00
PELVIS	72170	\$86.00	\$43.00
SHOULDER	73030	\$70.00	\$35.00
SKULL	70250	\$108.00	\$54.00
THORACIC	72070	\$80.00	\$40.00
TIB/FIB	73590	\$62.00	\$31.00
TOE	73600	\$62.00	\$31.00
WRIST	73100	\$82.00	\$41.00

<b>PROCEDURES</b>	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
ABSCESS DRAIN SIMPLE	10060	\$171.00	\$85.50
ABSCESS DRAIN COMP.	10061	\$294.00	\$147.00
BURN DRESS SIMPLE	16020	\$108.00	\$54.00
BURN DRESS COMP.	16030	\$195.00	\$97.50
INGROWN TOENAIL	11765	\$200.00	\$100.00
IV HYDRATION 1ST HOUR	96360	\$178.00	\$89.00
PARONYCHYCHIA	10060	\$171.00	\$85.50
PILONIDAL CYST	10080	\$218.00	\$109.00
SEBACEOUS CYST	10060	\$171.00	\$85.50
SUBUNGAL HEMATOMA	11740	\$70.00	\$35.00

<b>LACERATIONS</b>	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
<b>FACE/EAR/LIP MOUTH SIMPLE</b>			
2.5 cm-LESS	12011	\$243.00	\$121.50
2.6-7.5 cm	12013	\$269.00	\$134.50
7.5-12.5 cm	12014	\$320.00	\$160.00
12.6-20 cm	12015	\$520.00	\$260.00
<b>FACE/EAR/LIP MOUTH COMPLICATED</b>			
2.5 cm-LESS	12051	\$396.00	\$198.00
2.6-5.0 cm	12052	\$467.00	\$233.50
5.1-7.5 cm	12053	\$593.00	\$296.50
<b>SCALP/NECK/TRUNK SIMPLE</b>			
2.5 cm-LESS	12001	\$229.00	\$114.50
2.6-7.5 cm	12002	\$244.00	\$122.00
7.5-12.5 cm	12004	\$350.00	\$175.00
12.6-20 cm	12005	\$456.00	\$228.00
<b>SCALP/NECK/TRUNK COMPLICATED</b>			
2.5 cm or less	12031	\$322.00	\$161.00
2.6-7.5 cm	12032	\$419.00	\$209.50
STERI STRIPS	G0168	\$65.00	\$32.50
DERMABOND	G0168	\$65.00	\$32.50
<b>FB REMOVAL SIMPLE</b>			
	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
EAR	69200	\$199.00	\$99.50
EYE/CORNEA	65220	\$151.00	\$75.50
EYE/CONJ	65205	\$151.00	\$75.50
NOSE	30300	\$289.00	\$144.50
SUB-Q	10120	\$199.00	\$99.50

<b>MISC. PROCEDURES</b>	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
EAR LAVAGE	69209	\$92.00	\$46.00
EKG	93000	\$77.00	\$38.50
NEBULIZER	94060	\$50.00	\$25.00
SPIROMETRY	94010	\$89.00	\$44.50
NEXPLANON DEVICE	J7307	\$800.00	\$400.00
NEXPLANON INSERTION	11981	\$300.00	\$150.00
NEXPLANON EXTRACTION	11982	\$300.00	\$150.00
<b>QUICK VISITS</b>	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
FLU SHOT	90658	\$28.00	FREE
PPD READ		\$10.00	\$5.00
TB SKIN TEST	86580	\$25.00	\$12.50
SUTURE REMOVAL	S0630	\$20.00	\$10.00
X-RAY CD		\$10.00	\$5.00
<b>IN HOUSE LABS</b>			
<b>TEST</b>	<b>CPT</b>	<b>PRICE</b>	<b>Care Club</b>
CBC	85025	\$40.00	\$20.00
CMP	80053	\$60.00	\$30.00
FINGER GLUCOSE	82948	\$20.00	\$10.00
HCG URINE	81025	\$20.00	\$10.00
HEMAOCCULT	82271	\$22.00	\$11.00
INFLUENZA A/B	87400	\$20.00	\$10.00
MONO TEST	86403	\$20.00	\$10.00
STREP TEST	87880	\$20.00	\$10.00
UA w/o Microscope	81003	\$20.00	\$10.00