Welcome to Hoag Physician Partners! We are pleased to be your chosen health care provider. At Hoag Physician Partners, we are committed to providing quality care for your entire family while offering you access to the unparalleled level of care that only Hoag can provide.

What You Can Expect from Hoag Physician Partners

Hoag Physician Partners (HPP) is a comprehensive network of world-class physicians that includes more than 425 physicians representing a broad range of specialties.

As a member of Hoag Physician Partners, you will enjoy full access to the Hoag Hospital network, including the No. 1 ranked hospital in Orange County by U.S. News and World Report, and its offering of services, including three hospital campuses, 14 Hoag Urgent Care centers, 9 Hoag Health Centers, 13 Hoag Imaging Centers and more. Hoag Physician Partners also offers you access to Hoag’s renowned Institutes of Excellence in the areas of Orthopedics, Cancer, Neurological Diseases, Women’s Health and Heart and Vascular.

If you have questions, please do not hesitate to contact your physician's office or our Member Services at 949-791-3501 (TTY: 711).
Since 1952, Hoag has delivered a level of personalized care that is unsurpassed among Orange County’s health care providers. By choosing a Hoag Physician Partners physician, you receive access to the Hoag network of renowned specialists and services. Hoag Physician Partners is proud to be an extension of Hoag’s services by allowing you access to all of Hoag.

**Hoag Acute Care Hospitals**

To contact one of Hoag’s campuses, call 800-400-HOAG (4624).

**HOAG HOSPITAL NEWPORT BEACH**  
One Hoag Drive  
Newport Beach, CA 92663

**HOAG HOSPITAL IRVINE**  
16200 Sand Canyon Avenue  
Irvine, CA 92618

**HOAG ORTHOPEDIC INSTITUTE**  
16250 Sand Canyon Avenue  
Irvine, CA 92618
Community Education

As an added benefit to you and your family, we offer community education activities that focus on the mind, body and spirit. These classes and support groups are designed to improve your quality of life and keep you and your family healthy. Group classes on topics such as diabetes, weight management, parenting and more are available throughout the year. Talk to your doctor about what classes might benefit you. For general class information, visit www.hoag.org/education or call 800-400-HOAG (4624).

Advanced Health Care Directives

An advanced health care directive is the best way to make sure your health care wishes are known and considered if, for any reason, you are unable to speak for yourself. It also lets you name someone else to make health care decisions for you if you become unable to make these decisions.

A free, easy-to-read copy of an advanced health care directive can be downloaded at www.iha4health.org. It is available in English, Spanish, Chinese and Vietnamese. You may also call the Caring Connection at 800-658-8898 or visit www.caringinfo.org for general information or to receive advanced health care directive forms.
Your Experience

We are honored to be your partner in you and your family’s care. We value your feedback on the care and service we provide. Please let us know if there is anything we can do to improve your experience.

We take this feedback very seriously and use it to recognize our staff and to help us improve care at Hoag.

Thank you for choosing Hoag Physician Partners for your health care needs and please accept our heartfelt wishes for a healthy future for you and your family.

Your PCP, Your Partner in Health

To guide your journey to optimal health, your primary care physician – or PCP – will be your key point of contact. You and your PCP will establish and maintain a relationship, and he or she will be responsible for managing your overall care. Please call your PCP’s office as soon as possible and let them know you are a new patient, if applicable. On your first visit, you will be asked to show your insurance card, complete paperwork and process any co-payments.

As a Hoag Physician Partners patient, your continuity of care is of the utmost importance. If you are in the middle of a medical treatment or have any scheduled procedures or services after the new year, please let your PCP know so that we can assist you.

Please note that you can change your primary care physician at any time. Simply contact the customer service number listed on the back of your insurance card and provide the representative with the name of the physician you choose. Depending on your health plan, the change may take up to one month to become effective.

If you need help choosing a doctor, contact our Personal Service Team at 800-400-HOAG (4624).

Scheduling or Canceling an Appointment

Once you’ve selected a doctor, call the physician’s office directly to schedule an appointment. If it is your first time visiting the doctor, we recommend you inquire about the process to get your current medical records to the physician prior to your appointment.

We know missed appointments are often unavoidable, but they are also an opportunity for someone else to see the doctor. If you can’t make your scheduled appointment, please call your doctor’s office at least 24 hours in advance. When you call, your doctor’s office will be happy to reschedule your appointment for a more convenient time. Even if you have to cancel at the last minute, please call so your physician’s office can try to accommodate someone else.

Appointment Checklist

To make your appointment successful, we recommend you bring your:

- Insurance card
- Current medications
- Medical records and lab results

Refilling Your Medication

To have your prescription refilled, call your pharmacy three to five business days before it runs out. The pharmacy will contact your doctor’s office for prescription verification.

Customer Service – Hoag Personal Care Team

Our Personal Service Team is available to answer any questions or concerns you may have regarding health care services provided by Hoag or our physicians. If you have general questions or need help with locating our facilities, please call 800-400-HOAG (4624).

Specialty Physician Referral

To check the status of a specialty referral, please call Member Services at 949-791-3501 (TTY: 711), Monday through Friday, 7 a.m. to 5 p.m. or email member.services@hoag.org.
Language Assistance

Should you need language assistance, please contact your physician’s office so they can best coordinate your needs. Language assistance is provided to patients free of charge.

Health Plans Accepted

Hoag Physician Partners accepts most major insurance plans. To find out if we accept your health plan, call our customer service department at 800-400-HOAG (4624).

Copayments and Billing

Most insurance plans require a copayment, which is due at the time of service. After your appointment, your insurance will be processed, and you will be billed for any services not covered by your insurance plan. If you are uncertain whether a particular service is covered, please call your insurance plan directly. If you have questions about a bill, please call the phone number listed on the billing statement.

Seeing a Specialist

We offer world-class physicians in a wide range of medical specialties. Depending upon your insurance plan, you may need a referral from your primary care physician or authorization from your insurance plan to see a specialist. For help in selecting a specialist, please talk to your primary care doctor to obtain a referral or recommendation for a specialist that will help you meet your health goals.

Please note that our physicians and staff are not rewarded for issuing denials of coverage or care. Evidence based criteria is utilized for decision making and is available upon request. No offers for financial incentives are given that would encourage decisions resulting in underutilization. If your referral is denied for any reason, you will receive written notification along with a reason for the denial. If you have any questions about this process, please contact your primary care physician directly, or you may contact our Member Services line at 949-791-3501 (TTY: 711) or send us an email at member.services@hoag.org

Utilization Management Process

Utilization Management (UM) comprises the referral process for approvals or denials of requested services. Utilization Management’s decision is based only on appropriateness of care and services, subject to the evidence of coverage and benefits contractually available to you.

No restriction is placed on any of our providers that precludes discussing appropriate treatment options with you. Utilization Management decisions are based on the appropriateness of care and services required for each patient’s individual needs.

Utilization Management personnel or Hoag Physician Partners physicians do not receive any compensation nor are given any financial incentive that would encourage barriers to care and service. Requests for coverage of services are reviewed to determine that the service is a covered benefit under the terms of your health plan and that the services delivered are consistent with established guidelines.

Upon request, the UM Department will provide the current UM policy, procedure and/or criteria used to authorize, modify or deny health care services to members or persons designated by a member.

Appealing a Decision for Denial of Service

If for any reason you are denied a medical service, you will receive a letter that explains the circumstances and provides detailed instructions on how to file an appeal with your health plan.

In the event a request for coverage is denied, you, or your provider acting on your behalf, may appeal this decision through the appeal process and, depending on the specific circumstances, to an external utilization review organization, which uses independent physician reviewers, a governmental agency or the plan sponsor.

If you wish to request the UM information/criteria that was used in making the decision for your denial of service, please contact our Member Services Department at 949-791-3501 (TTY: 711). Upon request we will provide this information to you.
When your health plan receives your appeal, Hoag Physician Partners will obtain your records and the health plan will determine to uphold or reverse the decision and will notify you of their decision.

If you have grievances about the quality of care and/or services, you can file a complaint with your health plan. If you need assistance obtaining grievance forms from your individual health plan, you may contact our Member Services Department.

Hospitalist Program

Should you require a hospital stay, you will be seen by a hospitalist – a physician who specializes in hospital-based medicine.

Our hospitalists are solely dedicated to caring for patients in the hospital. On-site 24 hour a day, seven days a week, the hospitalist will respond quickly to changes in your condition, order and review tests, consult with specialists and stay in close contact with you and your family.

The hospitalist and your physician are associates and will communicate regularly to ensure continuity, resulting in high-quality care. Additionally, after you are released from the hospital, a discharge summary will be sent to your physician. This summary will provide details on the hospital care, test results and discharge plans, which will all help to facilitate your transition from the hospital to the outpatient care facility.

After-Hours Care

You don’t just get sick during business hours, which is why we don’t just offer care from 8 a.m. to 5 p.m. For non-emergency health issues, an appointment with your personal physician should always be your first choice. If your doctor isn’t available and you need care at night or on the weekend, we offer the following options:

Emergency Care

If you have a life-threatening emergency, call 9-1-1. If you experience an injury or condition that could endanger your health if not treated immediately (chest pain, loss of consciousness, severe bleeding, trouble breathing, or signs of stroke), please call 9-1-1 or go to the nearest emergency room.

Urgent Care

Before heading to the emergency room, think about whether your situation poses an immediate, serious threat. If not, one of our urgent care centers could be a better fit. Urgent care centers offer more convenient, less-expensive alternatives for situations that require immediate medical attention but are not life-threatening.

Urgent care facilities will accept your urgent care copay. We recommend you contact your insurance company to determine your urgent care copay.

Common Reasons to Visit Hoag Urgent Care

INJURY OR TRAUMA

- Fractures, broken bones
- Pains, strains, sprains
- Cuts, wounds, burns

MINOR ILLNESSES

- Coughs, colds, sore throat
- Fever, vomiting, diarrhea, flu
- Headaches, earaches, infections
- Stomachache, heartburn
- Urinary and gynecological issues
- Allergies, congestion
- Bites, rashes

ADDITIONAL CARE

- Sports physicals
- Blood pressure and other health screenings

Hoag Urgent Care Locations

Hoag Urgent Care is available to treat life’s unexpected illnesses and injuries.

- Reserve your spot online at hoagurgentcare.com
- Open 7 days a week
- Open Nights and Weekends
- 14 locations
- Treats children and adults
Hoag’s Urgent Care Centers are open Monday through Friday from 8 a.m. to 8 p.m. as well as Saturday/Sunday from 8 a.m. to 5 p.m. All Hoag Urgent Care Centers offer the ability to reserve a spot online by visiting www.hoagurgentcare.com.

Please contact the urgent care center directly for hours of operation. Copays vary subject to insurance.
Refer to www.hoag.org for specific imaging services at each location.
PATIENTS’ RIGHTS AND RESPONSIBILITIES

Hoag Physician Partners is committed to partnering with you to maintain good health. As a patient, you have the right to:

- Receive care without regard to race, ethnicity, national origin, religion, sex, age, mental or physical disability or medical conditions, sexual orientation, claims experience, medical history or genetic information.
- Receive information about Hoag Physician Partners, its services and health care providers.
- Be treated with professionalism, respect, courtesy and dignity.
- Have all matters considered with privacy and confidentiality.
- Participate in decisions about your health care and treatments, as well as receive adequate information about your diagnosis and proposed treatment plan from your health care provider.
- Engage in a candid discussion of appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage.
- Refuse any procedure or treatment if you so desire and be told what effect this may have on your health.
- Be informed of abnormal test results in a timely manner.
- Obtain a second opinion by another network provider.
- Have access to acute medical care 24 hours a day, and through emergency room coverage every day of the year if you have a life-threatening medical condition.
- Have the physician you visit focus his or her best efforts on your behalf in order to make a diagnosis and develop a proposed treatment plan based on the information available at the time of the visit.
- Receive complete information about fees upon request.
- Voice complaints or appeals about Hoag Physician Partners or the care provided.
- Know that Hoag Physician Partners specifically does not reward practitioners or other individuals conducting utilization review for issuing denials of coverage, service or decisions that result in under-utilization.
- Submit to the provider an amendment to the medical record if upon review the patient believes any item or statement is incorrect or incomplete.
- Be represented by parents, guardians, designated family members or other conservators for those who are unable to fully participate in their treatment decisions.

As a patient, you have the responsibility to:

- Provide your health care provider with complete and accurate information.
- Follow the treatment plan agreed upon by you and your physician and notify him/her of any significant changes to your condition.
- Recognize that your primary care physician will provide the care he or she is trained to provide prior to seeking consultation with a specialist.
- Know the benefits, limitations and exclusions of your insurance coverage.
- Pay for services rendered, including co-payments and deductibles.
- Understand that before specialty care may be obtained, you must receive a referral from your primary care physician, if required by your insurance company.
- Give adequate notice of delay or cancellation of scheduled appointments.
• Contact your primary care physician or a substitute anytime for perceived urgent medical needs or questions.
• Know how to access health care services for routine, urgent and emergency situations. An emergency is a serious condition requiring immediate intervention. An urgent condition could either lead to a potentially harmful outcome if not treated or requires immediate attention (within 24 hours) due to the severity of the symptoms. A non-urgent condition includes a limited physician exam or follow-up of acute or chronic medical or surgical conditions.
• Designate a family member or other conservator if you are unable to participate in treatment decisions.
• Receive information about the organization, its services, its practitioners and providers, and patient rights and responsibilities.

PRIVACY PRACTICES

We understand that information about you and your health is personal. As one of several custodians of your Protected Health Information (PHI), we are committed to protecting the privacy of such information as required by law, professional accreditation standards, and our internal policies and procedures.

As of April 14, 2003, the Health Information Portability and Accountability Act (HIPAA) Privacy Rule took effect. We invite you to request a detailed notice of our privacy practices to acquaint you with the provisions of this rule. While we are not an entity directly covered by HIPAA and not legally required to provide this notice, we do so as a demonstration of our commitment to your privacy and to inform you of our legal duties and privacy practices, as well as your rights, under California and federal law. This notice explains your rights, our legal duties, and our privacy practices. It also describes how medical information about you may be used and disclosed and how you can get access to this information.

To obtain a copy of the Notice of Privacy Practices, please contact your physician’s office.
CONTACT US

MEMBER SERVICES PHONE LINE
949-791-3501 (TTY: 711)
Staffed Monday through Friday
from 7 a.m. to 5 p.m.
Email us: member.services@hoag.org

HOAG PERSONAL SERVICE TEAM
800-400-4624

HOAG’S MAIN LINE
949-764-HOAG (4624)

RADIOLOGY AND IMAGING APPOINTMENTS
800-309-9729 and 949-764-5573

HOAG FAMILY CANCER INSTITUTE
949-764-5542

NEUROSCIENCES INSTITUTE
949-764-6066

JEFFREY M. CARLTON HEART & VASCULAR INSTITUTE
949-764-5871

HOAG WOMEN’S HEALTH SERVICES
Breast Center
877-710-3370
Women’s General Information
800-400-HOAG (4624)
GYN and GYN Surgery
877-827-6684
Maternity Tour
949-764-BABY (2229)
Prenatal Classes/OB Education
866-300-1671