

# **Patient Advocate / Care Giver's Guide**

## **Objective of Guide:**

The Patient Advocate / Care Giver's Guide has 3 pages to assist the (Advocate/Care Giver) through the first days of what may be an extended hospital stay (Weeks –Months).

### **Page # 1. Communication**

- A. Communication devices
- B. Patient's Medical history

### **Page # 2. Medical Data**

- A. Patient information
- B. Emergency contact information
- C. Medical conditions
- D. Medical Insurance

### **Page # 3. Health Care**

- A. Hospitals
- B. Insurance providers

## Patient Advocate Guide

**Communication**---When communicating with **Medical Personnel**, the **Patient Advocate** will find it helpful to have the following resources:

- **Computer**---if available
- **Cell Phone**---(may be used to store patient's medical insurance information)
- **Directory of Family/friends**---(may be used to retain phone#/ Email#)
- **Notebook/Binder/Folder**---(may be use to retain important records)
  - a. **Notebook** should be used to retain the following information
    - 1. **Primary Care Doctor's phone # /Email #**
    - 2. **Clergy phone # /Email #**
    - 3. **Patient's Medical** history prior to current hospital stay
- **Patient's Medical History**---
  - 1. Retain a copy of complete medical history of patient prior to hospitalization
  - 2. Complete list of all drugs and medications used by patient i.e. Blood pressure
- **Medical Insurance data**---
  - 1. **Insurance Coverage**--- (HAP / Blue Cross / Blue Shield / Medicare / Medicaid)
  - 2. Retain a copy of all insurance information in cell phone (photo copy)
- **Hospital Support Group (for Care Giver)**---
  - 1. Identify reliable small group of people who can provide long term support
  - 2. Recommendations include (a) Clergy / Prayer Team
  - 3. Friends and family to visit hospital with Care Giver
- **Medical Data** (Devices to store Patient's medical information)
  - 1. **Laptop Computer**---create spread sheets to record patient information
  - 2. **Cell Phone**---retrieve patient information/ (take photos of medical malpractice)
  - 3. **2 Binders/ Notebooks**---
    - a. **Binder # 1** remains in the patient's hospital room to record daily operations i.e. record time patient receives medications / questions to ask hospital staff
    - b. **Binder # 2** remains home to record patient's medical information
      - 1. Patient's Medical Insurance Policy # 000-000-000
      - 2. Insurance Plan & contact information (phone # / Email #)
      - 3. Social Security #---000-000-000
      - 4. Driver's license # 000-000-000

**Keep Information Up To Date!! Review at least Every 6 Months**

**Medical Data Reviewed as of            Mo.            YR.**

<b>Name:</b>		<b>Sex: M/F</b>	
<b>Address:</b>			
<b>Doctor:</b>		<b>Phone#:</b>	
<b>Preferred Hospital:</b>			
<b><i>Emergency Contacts</i></b>			
<b>Name:</b>		<b>Phone#</b>	
<b>Address:</b>			
<b>Name:</b>		<b>Phone#</b>	
<b>Address:</b>			
<b><i>Medical Data</i></b>			
<b>Special Conditions/Remarks:</b>			
<b><i>Medication</i></b>		<b><i>Dosage</i></b>	<b><i>Frequency</i></b>
<b>Pharmacy:</b>		<b>Phone#</b>	
<b>Date of Birth:</b>			
<b>Blood Type:</b>		<b>Religion:</b>	
<b>Health Care Proxy on file at:</b>			
<b>Living will on file at:</b>			
<b>Recent Surgery:</b>		<b>Date:</b>	
<b>Do you have an EMS-No CPR Directive or a DNR form?</b>			<b>Yes    No</b>
<b>Where is the form located?</b>			
<b><i>Medical Conditions</i></b>			
<b>List Medical conditions 1.</b>			
2.			
3.			
<b><i>Allergies</i></b>			
1.	2.	3.	4.
5.	6.	7.	8.
<b>Medical Insurance</b>			
<b>Med Ins Co:</b>			
<b>Policy #</b>			
<b>Other Med Ins Co:</b>			
<b>Policy #</b>			
<b>Medicaid #:</b>		<b>Medicare #:</b>	

## Medical Resource

### \*Tracking patient's Medical Records (history):

**Stay in Network** (health care system) ---when possible, keep the patient in one **Hospital Health Care System**, i.e. if patient is treated by **DMC (Detroit Medical Center)**, all treatment should come from that **Health Care System**:

- **ICU**---intensive care unit
- **Select Specialty Hospital**--- (long term care Hospital)
- **Nursing Home**---(physical therapy/ assisted living)
- **Hospital Health Care Systems**---The Detroit Metropolitan Area is fortunate to have a number of excellent Health Care Providers (Hospitals), four major Health Care Providers are listed below:

<b>Detroit Metropolitan Health Care Providers (Networks)</b>		
<b>Health Care System</b>	<b>Contact Information</b>	<b>Phone #</b>
<b>Beaumont Hospital</b>	468 Cadieux Rd. Grosse Pointe Mi. 48230	313-473-1000
<b>DMC (Detroit Medical Center)</b>	4201 St. Antoine Boulevard, Detroit, Mi 48201	313-745-3000
<b>Henry Ford Health System</b>	2799 W. Grand Blvd. Detroit Mi. 48202	313-916-2600
<b>St. John's</b>	22101 Moross Rd. Detroit Mi. 48236	313-343-4000

<b>Insurance Provider</b>		
<b>Name of Provider</b>	<b>Contact Information</b>	<b>Phone #</b>
<b>Blue Cross Blue Shield of Michigan</b>	600 E. Lafayette Blvd. Detroit, Mi. 48226-2998 (Email-bcbsm.com/medicare)	800-422-9146
<b>Health Alliance Plan HAP</b>	2850 W. Grand Blvd Detroit Michigan 48202	800-422-4641
<b>KEPRO</b> intelligent value	5201 W. Kennedy Blvd., Suite 900-Tampa Fl. 33609 <a href="http://www.keproqio.com">www.keproqio.com</a>	Office# 855-408-8557 Fax# 884-834-7130
<b>PHCS Personalize Home Care Services</b>	28021 Southfield Rd. Suite 200 Lathrup Village, Mi. 48076 <a href="mailto:info@myphcs.com">Email-info@myphcs.com</a>	Office# 248-621-1111



## Payment Log

Date Received	Bill Amount	Billing Party	Description / Details	Payment Status	Account Paid From	Date Paid
12/22/2019	\$1,575.52	State of Michigan	State Taxes	Paid	\$1,575.52 Acct. # 333-222-111	1/5/2020
12/25/2019	\$3,250.52	City of Detroit	City Taxes	Paid	\$3,250.52 Acct.# 333-222-111	2/1/2020
1/4/2020	\$150.00	Church	Tithes	Paid	\$150.00 Acct. # 333-666-333	1/10/2020
1/5/2020	\$250.00	City of Detroit	Water / Sewage	Paid	\$250.00 Acct.# 333-666-333	1/10/2020
1/5/2020	\$250.00	Consumer Energy	Gas	Paid	\$250.00 Acct.# 333-666-333	1/10/2020
1/7/2020	\$180.00	D.T.E.	Electricity	Paid	\$180.00Acct.#999-666-333	1/10/2020
1/9/2020	\$1,000.00	Credit Union (Mortgage)	House/Mortgage	Paid		1/10/2020
1/10/2020	\$500.00	AAA (House Insurance)	Home Insurance	Paid		1/17/2020
1/12/2020	\$500.00	AAA (Auto Insurance)	Car Insurance	Paid		1/17/2020
1/12/2020	\$60.00	ADT Alarm System	Security Services	Paid		1/17/2020
1/14/2020	\$40.00	GFL Environmental	Trash	Paid		1/17/2020
1/15/2020	\$110.00	Wayne County College	Tuition	Paid		1/17/2020
1/15/2020	\$450.00	American Express	Shopping	Paid		1/17/2020
1/16/2020	\$350.00	Visa	Shopping	Paid		1/17/2020
1/17/2020	\$250.00	Chase	Shopping	Paid		1/24/2020
1/18/2020	\$150.00	Macy's	Clothing	Paid		1/24/2020
1/19/2020	\$850.00	Kohl's	Clothing	Paid		1/24/2020
1/20/2020	\$45.00	Club / Organization Dues	Comm. Support	Paid		1/24/2020
1/22/2020	\$450.00	ABC	Child Care	Paid		1/24/2020
1/22/2020	\$15.00	Planet Fitness	Exercise	Paid		1/24/2020
Month of February 2020						
2/4/2020	\$150.00	Church	Tithes	Paid	\$150.00 Acct. # 333-666-333	2/10/2020
2/5/2020	\$260.00	Consumer Energy	Gas	Paid	\$260.00Acct.#999-666-333	2/10/2020
2/7/2020	\$190.00	D.T.E.	Electricity	Paid	\$190.00Acct.#999-666-333	2/10/2020
2/9/2020	\$1,000.00	Credit Union (Mortgage)	House	Paid		2/10/2020
2/10/2020	\$500.00	AAA (House Insurance)	Insurance	Paid		2/18/2020
2/12/2020	\$60.00	ADT Alarm System	Security Service	Paid		2/18/2020
2/14/2020	\$40.00	GFL Environmental	Trash	Paid		2/18/2020
2/15/2020	\$110.00	Wayne County College	Tuition	Paid		2/18/2020