

# Going to the Doctor: What You Need to Know

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Finding a doctor and going for visits can be overwhelming. This sheet will help you learn how to:

1. Choose a doctor
2. Schedule an appointment
3. Get the most from your visits

## What kind of doctor should I see?



You should have a **Primary Care Physician (PCP) as your main doctor**. You should always see them first. Your PCP can:

1. Help you **keep track of your health** over time and make a plan to stay well
2. **Treat short-term illnesses** (like colds) and minor injuries
3. **Treat chronic illnesses** such as diabetes or high blood pressure
4. Get you in to see a **specialist** – a specialist is a doctor who treats a specific part of your body or who treats a specific type of illness
5. Help you **keep your health care costs down**

## How do I find a PCP that is right for me?



Find a list of **providers that are covered by your insurance**. To find this list:

- Ask someone in the **Human Resources** office
- Call the **number** or visit the **website** on the **back of your insurance card** (see reverse side of this sheet)



**Ask your family, friends, and coworkers** about the doctors they use. Be sure to check that this doctor accepts your insurance.

## How do I schedule an appointment?



1. **Before calling** the doctor's office, you will need:
  - Your **insurance card**, with member and/or group number
  - Your **calendar or schedule**
  - Your **personal information** (such as your birthday and your address)
  - The reason for your visit
2. Call your doctor's office to set up your appointment. **Make sure to tell them:**
  - Why you need the appointment. This will help them schedule enough time.
  - **If you need an interpreter**
3. Once you have an appointment, **save the date and time in your calendar**. If it's during work time, let your supervisor know.



# What should I bring to my visit?

## Bring these to every appointment:

-  Photo ID and insurance card
-  Personal information, including phone number and address
-  A list of your symptoms or health concerns
-  Health history or medical records
-  All your medicines (prescriptions and others)
-  A list of questions you want to ask your doctor

# What can I do to get the most from my visit?



Tell your doctor **what you expect** from the visit, such as:

- A prescription refill
- Relief from symptoms
- A form for your time off at work



**Ask questions** if you do not understand something. It is important to leave the doctor's office knowing what you need to do to be healthy.



Before you leave, **repeat back to your doctor what you understand** about:

- The name of your health problem
- The plan to treat it
- When to come back to the doctor

# Who can I contact if I have questions?

If you have questions about finding a doctor, you can contact Tyson **Human Resources** Department or your **insurance company** (see below)

|          |                                                                                                                                                                                                                                                                                                     |                                                         |          |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------|
| <b>1</b> | <b>Insurance Company</b>                                                                                                                                                                                                                                                                            |                                                         | <b>4</b> |
| <b>2</b> | Member Name<br><b>John Smith</b>                                                                                                                                                                                                                                                                    | Group # <b>555555</b>                                   |          |
|          | Member ID #<br><b>00000000</b>                                                                                                                                                                                                                                                                      |                                                         | <b>5</b> |
| <b>3</b> | RxBIN XXXXXXXX<br>RxPCN XXX                                                                                                                                                                                                                                                                         | PCP Copay \$<br>Specialty Copay \$\$<br>ER Copay \$\$\$ |          |
|          | <b>For Member Use Only</b><br>Member Services 1-800-555-5555<br>Provider Locator 1-800-555-5555                                                                                                                                                                                                     |                                                         | <b>6</b> |
|          | <b>For Provider Use Only</b><br>Utilization Management 1-800-5555<br>Provider Services 1-800-555-5555<br>Pharmacists 1-800-555-5555                                                                                                                                                                 |                                                         |          |
| <b>7</b> | MEMBER CLAIM FILING<br>Insurance Company<br>PO Box 00000<br>Somewhere, USA 99999                                                                                                                                                                                                                    |                                                         | <b>8</b> |
|          | Hospitals or Providers: file claims with insurance company<br><br>Members: see your benefit booklet or call member services for covered services. Possession of this care does not guarantee eligibility for benefits<br><br><a href="http://www.insurancecompany.com">www.insurancecompany.com</a> |                                                         |          |

**1. Insurance carrier** – the company that provides your insurance coverage

**2. Member name and ID** – your identifier within your insurance plan

**3. Prescription benefit codes** – lets pharmacies know how much to charge for medicines

**4. Group #** - identifies what type of plan you have

**5. Copay information** – tells you how much your copay will be for different types of care

**6. Phone numbers for members** to ask about benefits and providers that are covered by their insurance

**7. Phone numbers for providers** to ask questions about benefits, covered services, and billing

**8. Insurance website**