

**Agnes Oblas, ANP-C
Nurse Practitioner
New Paths to Healthcare, LLC
Ray Road Medical Center
13838 S. 46th Place, Suite #340
Phoenix (Ahwatukee), AZ 85044
602-405-6320**

Patient Demographics and Insurance Information

Last Name _____		First Name _____		Middle _____	
Street Address _____			Apartment or Unit # _____		
City _____			ZIP _____		
Home Phone _____		Cell # _____			
e-mail _____					
SSN _____		DOB _____		Marital Status _____	
Current Occupation _____				Full-time/Part-time _____	
Employer/Place of Business _____					
Work address _____					
City _____			ZIP _____		
Work Phone/ext. _____		Fax # _____			

Primary Insurance _____		New Paths Acct # _____	
Claims Address _____			
City/State/Zip _____			
Phone _____			
Policy Holder's Name _____		Relation to Patient _____	
Policy Holder's SSN _____		DOB _____	
Patient's ID # _____		Group/Policy # _____	
Secondary Insurance _____		New Paths Acct # _____	
Claims Address _____			
City/State/Zip _____			
Phone _____			
Policy Holder's Name _____		Relation to Patient _____	
Policy Holder's SSN _____		DOB _____	
Patient's ID # _____		Group/Policy # _____	

In case of emergency, please notify:

Name _____
Relationship to Patient _____
Contact # _____

I authorize disclosure of my protected health information to carry out payments to this provider. I understand that I am responsible for any charges not covered by my insurance including annual deductibles, co-pays, and balances due. This signature will remain effective as authorization for the duration of my care received at New Paths to Healthcare, LLC.

Date signed _____