

Dear Hirsch Pediatrics Patient,

We have enjoyed watching you mature into a thriving adult! Thank you for letting us be part of your life during this wonderful journey.

As of 2023 Hirsch Pediatrics will continue to provide care for our patients from 0 - 18 and transition patients 19 and older to an adult medical practice. We are writing this letter to ensure you have a smooth healthcare transition to adult medicine. For our current patients 19 - 21, we will continue to provide care for you through <u>August 2023</u>. For patients that have ongoing mental health or medication needs please contact us now to ensure continuity of care.

We recommend that you choose a new primary care home at your earliest convenience. You can access our current <u>adult care referral list</u> on the Hirsch Pediatrics website by navigating to the "Current Patients" and selecting "Teenage Patients at Hirsch Pediatrics."

Also once you turn 19 (or sooner if you prefer) we will <u>automatically upload a copy of your</u> <u>basic medical records to your Patient Portal.</u>

Once you have chosen a new primary care home, please send us a records request form (enclosed in this letter) so we can forward a copy of your records to you personally or to your new practice.

We wish you many years of health and success. It has truly been a privilege to get to know you.

Sincerely,

Steven F. Hirsch, MD, FAAP Gloribel L. Olexa, MD, FAAP Kristina A. Kissiova, MD, FAAP

HIRSCH PEDIATRICS TEENAGER REQUEST FOR MEDICAL RECORDS

I am requesting the following medical records (check one):

Basic records request (no additional fee) ** including all of the following documents:

- Continuity of Care Document (CCD)
- most recent well-child exam
- growth charts
- recent lab/radiology results (if applicable)
- recent consult notes (if applicable)

Other request (may incur additional fee noted below)** _____

When the records are available (check one):

Please upload records to my portal (no additional fee).

□ Other request (will incur additional fee noted below)**

I understand and agree that I am financially responsible for any fees associated with my request including the cost of supplies, labor, and postage. However, I will be notified of any applicable fees prior to the records being copied.**

** Note: **Hirsch Pediatrics does not charge for the basic records request and for records that are uploaded to your patient portal.** If requested in writing and for an additional fee noted below Hirsch Pediatrics can provide additional records at the standard medical record fee per Maryland law as well as send records to another provider or provide paper copies:

• A fee of .57 cents for each page of the medical record, and

• The actual cost of postage and handling, and

• Preparation fee of \$22.88, if the records are sent to another provider. The federal HIPAA regulations do not allow a charge for a preparation fee for records provided directly to the patient.

Date

Patient Name

Patient Signature