



Dokta Blong Mi Members Agreement

This contract is an agreement between Dokta Blong Mi (a medical practice in Port Vila, Efate, Vanuatu), Matthew J. Cornish, MD (physician) and you (parents and children in your family) and will be effective as of the ___ day of _____, 20__.

1. **Background.** Dr. Matthew J. Cornish (Dokta Matt, Dr. Cornish) operates a subscription-based medical practice in Port Vila, Vanuatu called Dokta Blong Mi (DBM). This agreement outlines the commitments and expectations of both parties.
2. **Mission.** The mission of Dokta Blong Mi is two-fold. First, to provide high-quality medical care to all DBM subscribers. Second, to support Dokta Matt in on-going building of medical capacity in Vanuatu.
3. **Family Members** (Names and Dates of Birth)
 - A. Child 1 _____
 - B. Child 2 (Participating Yes/No) _____
 - C. Child 3 (Participating Yes/No) _____
 - D. Child 4 (Participating Yes/No) _____
 - E. Parent 1 (Participating Yes/No) _____
 - F. Parent 2 (Participating Yes/No) _____
 - G. Participation of parents is wholly optional. Care provided parents and other adult family members will be limited to medical problems common to children (such as injuries and illnesses). Parents will not receive care from Dokta Matt for problems more unique to adults (such as heart attack, stroke, NCD management), thus assuring Dokta Matt will practice within the scope of his specialty. The offer to provide this level of care to parents is offered as a convenience and is not required for participation of children.
4. **Services.**
 - A. Routine Well Child Care. Age-based assessments and recommendations will be provided according to ideal practice standards. These are strongly encouraged as many problems can be prevented this way.
 - B. Home visits. Dokta Matt will come to your home at your scheduled convenience. It is the responsibility of the Members Family to assure the safety of Dokta Matt as well as any others present while in your home. At least one adult will need to be on-site when any care is being delivered at your home.
 - C. Emergency care. Available both at home and potentially at the location of an accident or injury. However, if the emergency is out of the constraints of what Dokta Matt is able to provide at that moment, subscribers are expected to seek alternate care immediately. The use of ProMedical is encouraged and all efforts will be made to coordinate care with ProMedical according to circumstances.

- D. Visit Summaries. Each visit will include an emailed summary with key findings and recommendations. These will serve as roadmaps as you and Dokta Matt work through challenges together.
 - E. Inpatient care is offered and is subject to any restrictions that variably may exist at Vila Central Hospital or elsewhere.
 - F. Email and phone access. Available for scheduling consultations.
 - G. Visitor Care. Family members temporarily visiting DBM Members Families are eligible for fee-for-service care for up to a four week period. Anticipate the fees to start between 7,000 vatu and 12,000 vatu.
5. **Services Not-Covered:**
- A. Practice outside of Dokta Matt's scope of training or accessibility.
 - B. Evacuation coverage.
 - C. Ambulance or EMS service.
 - D. Therapy (mental health, behavioral, physiotherapy, etc).
 - E. Obstetrical care.
 - F. Chronic pain management.
6. **Expectations.**
- A. Dokta Matt.
 - I. To maintain proper priorities: His family, Your Family, Children of Vanuatu.
 - II. To deliver the highest quality medical care possible.
 - III. To communicate clearly, in person and in writing.
 - IV. To limit the number of participants, prioritizing the needs of subscribers first.
 - V. To coordinate with other medical providers, in Vanuatu and abroad.
 - VI. During a four week annual home leave to the US and any other brief times away from Port Vila, to provide care for all DBM subscribers in whatever ways may be reasonable (including telemedicine support, coordination with local care, email support, etc.). Subscribing families may have the option instead to pause their subscription and resume on Dokta Matt's return.
 - B. Member Families.
 - I. To support both missions of DBM as stated above.
 - II. To inform Dokta Matt of needs and changes, medically and otherwise.
 - III. To work together with Dokta Matt for the good of your family.
 - IV. To pay for any additional expenses outside of what DBM provides.
7. **Scheduling and Triage**. Preventive Care and other non-urgent care should be scheduled ahead of time. This will primarily be provided Monday through Friday. Any urgent care will be delivered immediately, limited by the principle of triage, eg. Children in (or circumstances of) greatest need will receive care first.
8. **Communication**. Email is encouraged for non-urgent use. Calls for urgent needs. Text is also available for convenience. Facebook is not to be used for any clinical care. Dr. Cornish will strive to keep all communications secure and private within good practice and the inherent risks and restrictions of each modality.



9. **Consent for Treatment.** This contract serves as consent to provide all care deemed medically necessary by the medical decision maker (parent/guardian). Especially in the case of an emergency, additional consent will not be required.
10. **Photo Use.** You give permission for any photos taken during the course of delivering care to you, the subscriber(s), to be used for teaching, instructional, research purposes unless otherwise expressed in writing. Use in DBM promotional materials can occur with verbal consent.
11. **Electronic Health Record.**
- A. Security. Dokta Matt will take all reasonable available measures to keep DBM member information private and secure.
 - B. Access to Records. You will be provided access to all medical records kept on behalf of your family upon request.
12. **Fees.**
- A. Typical subscription fee per month is 10,000 vatu for an individual or 20,000 vatu per family with a 3 month minimum.
- | | |
|--|----------------------|
| One Child..... | 30,000 vatu/3 months |
| Family (up to 2 parents & 4 children)..... | 60,000 vatu/3 months |
- Additional discounts may apply.
- The total fee with this contract is _____ vatu for _____ months.
- B. Typical consultation fees for patients enrolled as DBM Members are:
- | | |
|---|-----------------------|
| Daytime Consultations....(Monday to Friday, 8am to 4pm)..... | 7,000 vatu |
| After Hours Fee..... | 5,000 vatu |
| Extended Visits...(beyond typical 10-30 minute consultation)..... | 5,000 vatu/30 minutes |
| Additional Fees...(such as medicines, supplies, procedures, etc)..... | may apply |
13. **Insurance.** DBM is not a form of insurance. We believe that DBM will provide an incomparable level of security. However, you are encouraged to maintain health insurance, including evacuation insurance as appropriate. Expect that DBM subscription fees will not be covered by your insurance policies (though we have confirmed that some plans have reimbursed the visit and other fees).
14. **Liability.** Dr. Cornish will provide medical care according to professional guidelines. Given the setting of care (in a developing country), adaptations will need to be made. Members understand that, given the setting, it is not expected that outcomes will be identical to settings with ideal resources. Nonetheless, Dokta Matt will do all in his power to provide the very best possible care within the limitations.
15. **Intellectual Property.** Any material developed by Dokta Matt or used under license will be considered intellectual property and is not to be distributed to others without written permission.
16. **Supervening Circumstances.** Dokta Matt will make every reasonable effort to provide the care described herein. However, he will not be held in violation of this contract if supervening circumstances prevent the discharge of his responsibilities. Examples of such circumstances could include severe weather, earthquakes, strikes or labor unrest, political unrest, violence or threat of violence, war, government action or inaction, or any other circumstance not within reasonable control.
17. **Contract Termination.** This contract will remain in place for _____ months from the date of payment of the agreed upon fees. It will renew automatically at contract



termination unless either party gives prior notice to the contrary. Amendments to the contract may apply. Once the renewal fee is submitted and accepted, this contract can proceed for periods of up to twelve months unless otherwise agreed upon in writing. Premature contract termination may occur if either party is not maintaining the agreements of this contract. Partial or full refunds will be at the discretion of Dokta Matt and Dokta Blong Mi according to circumstances.

18. **Amendments.** Amendments or addenda to this contract are binding with the signature of Dr. Cornish and one of the members listed below.
19. **Severability.** If any portion of this contract is deemed not legally binding, the remainder of the contract will remain in place.
20. **Dispute Resolution.** Both parties agree to resolve disputes respectfully without disparaging the other. In the event that there are major differences in opinion, we agree to engage an arbitrator rather than pursuing legal action. Arbitration can be informal with a disinterested third party or formal with a professional.

Parent/Legal Representative Name _____
Parent/Legal Representative Signature _____
Relationship to Patient(s) _____
Email _____
Phone _____
Address (GPS preferred) _____
Date _____

Parent/Legal Representative Name _____
Parent/Legal Representative Signature _____
Relationship to Patient(s) _____
Email _____
Phone _____
Date _____

Dokta Blong Mi Representative _____ Matthew J. Cornish, MD, FAAP
Signature _____
Date _____



Version: 1 Feb 2020

