PerformCare Freedom of Choice

ASSURANCE OF FREEDOM OF CHOICE

This form verifies that I have been informed and understand that I have a choice of Providers available to me.

I have been given freedom of choice in selecting available Providers and realize that I may choose to receive treatment at any agency available through PerformCare. I am aware that I have a right to choose my Provider and treatment options. If I wish, alternate Providers will be made available to me through PerformCare Member Services Department.

- PerformCare Members Services for the Capital Region can be reached at **1-888-722-8646.**
- PerformCare Members Services for Franklin/Fulton can be reached at **1-866-773-7917**

I am also aware that my Provider will discuss with me all treatment options and what the treatment options involve including advantages and/or disadvantages of each type of treatment.

Family members and significant others will be included in treatment if I wish them to be.