

Preparing for Your Preregistration

At AdventHealth, we recognize that financial and insurance matters are an integral part of your medical experience, and we know that these discussions can sometimes be delicate. Our compassionate and knowledgeable staff are here to assist you with any financial or insurance-related questions you may have, whether it's before, during, or after your visit. We are committed to making this aspect of your care as smooth and stress-free as possible.

Having your information handy when completing preregistration allows for a quicker, more efficient process. Please be prepared to provide the following:

Patient Information

- ☐ Legal first and last name (as appears on photo ID)
- ☐ Date of birth
- ☐ Mailing address
- ☐ Telephone number
- ☐ Legal Sex (as appears on ID)
- ☐ Contact method preference(s) (text, email and/or phone)
- ☐ Email address
- ☐ Primary care provider (PCP)
- ☐ Patient emergency contacts
- ☐ Preferred language
- ☐ Interpreter services requested
- ☐ Race*
- ☐ Ethnicity*
- ☐ Citizenship/Immigration Status**

International Patients

- ☐ Discounts Available
- ☐ Free Translation Services
- ☐ Qualified and Knowledgeable financial counselors
- ☐ AdventHealth will bill your international coverage if applicable please present insurance card

Visit/Order Information (if applicable)

- ☐ Chief complaint or ICD10 diagnosis code (if available) CPT code or description of scheduled service(s)
- ☐ Admitting / attending / referring provider

Insurance Information (if applicable)

- ☐ Patient relationship to subscriber
- ☐ Subscriber legal first and last name
- ☐ Subscriber date of birth
- ☐ Subscriber employment status (if applicable)
- ☐ Subscriber employer name (if applicable)
- ☐ Insurance name and plan type
- ☐ Insurance policy number
- ☐ Insurance group number
- ☐ Insurance phone number (if applicable)
- ☐ Precertification / authorization number (if approved)
- ☐ Guarantor legal first and last name (if applicable)
- ☐ Guarantor mailing address (if applicable)
- ☐ Guarantor email address (if applicable)
- ☐ Guarantor phone number (if applicable)
- ☐ Government programs information/forms (e.g., MSPQ, ABN)

*Collecting Race, Language, and Ethnicity (RLE) data during healthcare visits is essential to improving health equity and quality of care. This information helps identify and address disparities in treatment outcomes, access, and patient satisfaction across diverse populations. It supports more accurate clinical decision-making, informs culturally and linguistically appropriate services, and enables compliance with federal and state reporting requirements. By understanding the backgrounds of the patients they serve, healthcare organizations can deliver safer, more personalized, and more effective care.

**This information is a requirement for hospital patients in Florida and Texas for the purpose of determining how much money is paid each year for uncompensated care related to individuals unlawfully present in the US. This information does not include the patient's identity when it is provided to the state.