

Important Information for our Patients Regarding Annual Well Woman Exams

Our Office makes every effort to follow the current coding practices for reporting medical services as dictated by Federal law and the American Medical Association (AMA). These regulations can be quite complicated and generate many questions from our patients. The purpose of this handout is to clear up any confusion caused by these complicated rules regarding the billing of Preventive and Screening services.

The Well Woman or Preventive Medicine charge for our practice includes:

- A complete history and examination in addition to a breast and pelvic exam. There will be questions about other medical conditions and counseling on risk factors such as sexually transmitted disease prevention, diet and exercise, stress management, smoking cessation, self breast exams, birth control, menopausal symptoms and hormone replacement therapy.
- Pap Smears will be taken yearly unless you have had a hysterectomy. In that case, the pap will be collected every 2-5 years depending on your physician's recommendation. Please be aware that some insurance companies will not pay for a "Well Woman" exam unless you have a pap smear test. **Please know your benefits.**
- Appropriate labs (such as hormone or STD tests) or diagnostic tests (such as mammogram or Bone Density scan) may be ordered and **will be billed separately by those entities. Please know your benefits concerning additional labs or tests** as we do not verify for other entities (i.e. Quest Lab, or imaging offices).
- Immunization administration, vaccine/toxoid products and other procedures are not included.

As outlined above, discussions about problems and conditions you are being treated for that are ***under control*** are considered an integral part of the Well Woman Exam and cannot be billed as a "problem/sick visit" under Federal Compliance Rules.

Our Doctors cannot comply with any requests to improperly alter the medical records for the purpose of obtaining payment by billing for a "problem/sick visit" when no other medical concerns were presented or evaluated.

While we regret that your insurance carrier may not pay for more of your annual exam, it is preventive by intent. You as the insured will be responsible for payment as dictated by your insurance plan of all co-payments and deductibles at the time of service.

Similarly, if a separate problem is identified during the course of the Annual Exam that takes priority over the Annual, it will be billed as a "problem/sick visit". We are required to submit our claims based on the documentation in the medical record of the service provided to you.

Respectfully,
The OB-GYN Place, P.A.

Patient Signature _____ Date _____

Print Name _____