

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 (the 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 charges for our practice includes:

- A complete history and examination in addition to a breast and pelvic exam. 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 are included.
- The collection/preparation of Pap Smear specimen to the laboratory is included.
- Appropriate laboratory and diagnostic tests, such as a mammogram and DEXA, may be ordered and will be billed by those entities.
- 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** such as hypothyroidism, are considered an integral part of the Well Woman exam and cannot be billed as a "Sick Visit" under Federal Compliance rules.

If a separate problem is identified during the course of the Annual Exam such as a vaginal infection, infertility etc, we are required to submit our claims based on the documentation in the medical record of the service provided to you. This may include a separate office visit code, which your insurance company may expect you to pay for separate from your Annual exam visit. This will show up on your "Explanation of Benefits" letter you receive from them.

Our Doctors cannot comply with any requests to improperly alter the medical records for the purpose of obtaining payment by billing for a "Sick Visit" when no other major problems were 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.

If you have other problems at today's visit you may be responsible for that office visit payment after your claim has been processed. We will be happy to assist you with any questions. Providing you with high quality healthcare remains our first priority. We thank you for choosing us to assist

you with your healthcare needs.

Respectfully, Dr. J. Kyle Mathews		10/09
Patient Signature	Date	