

Annual Physicals/Screenings and Your Insurance

As a commitment to your health, we recommend that every patient have an “annual exam” that allows us to evaluate your overall health picture and make sure you are not developing any unexpected problems or illnesses.

Unfortunately, not all insurance companies pay for physical exams. Therefore, you will be personally responsible for services not covered/paid by your insurance.

Along with the examination, your doctor might suggest some “screening” tests be done to allow your doctor to get a better “picture” of your health. Some of these tests may be performed at a third party laboratory that bills separately from our office. Your insurance company may also consider these services non-covered and you will be expected to pay for them out of pocket.

Even if the results of these tests show some new problem, we must submit them as “screening” to your insurance company, and cannot change the information on the claim just to receive payment for the services from your insurance company.

Insurance Filing and the Law

Federal laws addressing all insurance companies require that we submit claims to an insurance company accurately reporting the exact services performed and the exact reason for performing them. **We are not allowed to change this information just so an insurance company will pay the claim.**

Our practice is committed to these laws and will submit claims to all insurance companies in this manner.

Non-Covered Services Are Your Responsibility

Our office will make every effort to identify your estimated financial responsibility and will collect for these services at the time of your visit. If your insurance company identifies any additional patient responsibility, you will receive a statement in the mail.

If you are not sure if a service is covered by your plan, you will need to contact your insurance company in advance to see if you are going to be responsible for payment.