

Appointments Scheduled for Annual Physicals

Here are a few things we would like you to know:

- An "Annual Physical" IS NOT THE SAME as an "Annual Wellness Visit." (http://www.providentsh.com/documents/AnnualWellness_Visit_Description.pdf)
- Medicare DOES NOT pay for an "Annual Physical." Medicare Advantage Plans such as AARP, etc. Medicaid and most commercial insurances generally do pay for an Annual Physical.
- Medicare DOES pay for an Annual Wellness Visit as do Medicare Advantage Plans such as AARP, etc.
- Your Annual Physical is scheduled for preventative maintenance and to address preventative care and issues. We also update your health and family history.
- It is not designed to address existing medical conditions/complaints.
- The codes billed to your insurance company or Medicare for that visit do not cover the active management of other health issues or existing conditions.
- If an existing or new issue is addressed during this visit, an appropriate office visit code will be billed in addition to the code for your physical exam. There may be an applicable copayment , coinsurance or deductible due based upon your insurance coverage.
- The services completed during a physical exam depends on your age, gender, medical history and whether you are a new or existing patient
- The discussion and treatment you receive during your physical, as well as tests ordered, is up to your provider.
- If testing is ordered for you, we may request that you schedule a follow up visit to discuss any lab results, finalize your plan of care and discuss any follow up questions. A copayment, coinsurance and/or deductible will apply depending upon your insurance.