

ANNUAL EXAM WITH/WITHOUT PROBLEMS

PATIENT AUTHORIZATION AND NOTICE

In an effort to keep you informed about your course of treatment and associated charges, we ask that you please read the following information and select one of the options.

ANNUAL EXAM

An annual exam, or “well” visit is a routine check-up which includes updating of the patient’s history, blood pressure and weight recordings and the ordering of preventative tests, such as mammograms, bone density testing, colonoscopy and routine screening lab work.

PROBLEM VISIT

A problem visit is a consultation which focuses on discovering and evaluating problems, such as HTN, thyroid issues, abnormal bleeding, pelvic pain, urinary symptoms, etc.

Each of these types of office visit has its own procedure code, or CPT, which is used to file claims with insurance providers, who determine their own allowable reimbursement for physician services. Frequently an annual exam becomes a problem visit, such as when patients present with medical complaints, or when the physician discovers abnormalities on the physical exam. In this case, the physician may elect to initiate evaluation of the problem and file a claim for both types of visits on the same day. Some insurance companies recognize and will reimburse for both services on the same day (minus the patient’s co-pay and deductible, for which you are responsible). Other insurances recognize only one visit per day, so if an annual and problem are both addressed, the CPT must be selected according to the complexity and time required for that visit.

Please choose one of the two options below and sign and date where indicated

I am here for an annual exam; however, if I have medical complaints or am found to have an abnormality on exam, I wish to have them addressed at this visit. I understand that the visit may be billed as **two separate CPT’s or a more detailed CPT than an annual exam alone.**

I am here for an annual exam **ONLY**. If I have other medical complaints or am found to have an abnormality on an exam, I prefer to return to the office on a different day to begin evaluation and treatment of the problem. I understand that today’s services will be billed as an annual (routine) visit and that **NO TREATMENTS WILL BE PRESCRIBED** until the problem is evaluated.

Patient Name

Date of Birth