



Women's Health Associates recognizes that understanding healthcare benefits (insurance) as well as healthcare billing rules/regulations are challenging and complicated. This is especially true when it comes to understanding the benefits covered by your insurance carrier that are considered "preventative" vs "problem focused" and medication refills.

Your provider wants to take care of you and address your healthcare needs.

What is the purpose of a routine preventive exam also known as the annual physical?

A routine preventive exam is to identify potential health problems in the early stages when they may be easier and more effective to treat. The technical definition of the routine preventive exam as a periodic comprehensive preventive medicine evaluation and management. The preventive exam is prevention focused and not "problem focused." This preventative examination may identify problems that require treatment (i.e. depression, high blood pressure, diabetes, etc). In identifying those, through screening examinations, treatment may be discussed and necessary. Once it is an identified problem, it is no longer prevention/screening. The preventive exam may include the following:

- Past medical, surgical, social, family and OB/GYN history
- Complete physical examination and review of body systems
 - Pap/HPV screening as indicated.
 - Breast exam as indicated.
 - Pelvic exam as indicated.
- Review of medications
- Age-appropriate immunizations review/recommendations
- Counseling regarding risk guidance and risk factor reduction interventions (ie lowering cholesterol, tobacco cessation, health lifestyle).
- Review and recommend age/gender appropriate screening tests (ie colonoscopy, bone density, mammogram).
- Common laboratory exams that are covered under most preventive screening benefits (this is plan specific)
 - Complete blood count (CBC)
 - Comprehensive Metabolic Panel (CMP or CHEM 12)
 - Thyroid Stimulating Hormone (TSH)
 - Lipid Profile (Cholesterol Screening)
 - Hemoglobin A1C (A1C – Screening for diabetes)
 - Pap smear (age appropriate)
 - HPV Screening (age appropriate)
 - Urinalysis (UA)

I want to only have the preventive services that are covered 100% by my insurance plan performed, how do I ensure that will happen?

It is important to recognize that there are thousands of insurance benefit plans despite being with a certain payer (ie Blue Cross, Blue Shield, Cigna, United Healthcare, Aenta, Select Health, etc). Neither



your attending provider nor their support staff know your specific plan benefits. Your provider and their staff are there to address your healthcare needs. You are responsible for knowing what services are covered under your health plan. Our billing staff can assist in helping you understand your benefits if you have questions.

The following steps can be taken to ensure that your routine preventive exam is billed correctly:

- When scheduling be clear that you are wanting to schedule your “yearly exam” or “annual exam”, and not that you are wanting a “checkup.”
- When you are with the provider, ensure that you only want to have your routine preventive exam. Your provider will ask if you have any other health concerns, as they want to ensure that your health concerns are being addressed. Please understand that depending on the concern, if it falls outside the scope of the routine preventive exam, there may be a problem focused exam/testing related charge submitted to the insurance. These will be subject to your plans benefit determination.
- Here are some common health concerns that are not part of “routine wellness screening”
 - Fatigue
 - Hair loss
 - Significant weight gain/loss
 - Pelvic or abdominal pain/discomfort
 - Difficult or painful urination
 - Menopause symptoms (i.e. hot flashes, mood changes, etc.)
 - Low libido
 - Vaginal irritation/dryness
 - Infertility
 - Chronic condition management (i.e. hypertension, asthma, diabetes, obesity, etc.)
 - Establishing care as a new patient

Why did I receive a bill after my routine preventive exam when it was supposed to be covered at 100%

If there were specific tests or exams performed that were related to a specific problem/concern brought up or discovered during your routine preventive exam, many plans do not cover them as part of the preventive wellness benefit. Your provider may need to perform these additional services to address the concerns that you brought up during the exam. These services are at the discretion of your health plan coverage. Our billing team bills your insurance based on the services received and documented by your provider, following regulatory guidelines. We only bill for the services rendered, we do not make the determination of how your insurance processes the claim.

If a problem is identified, further treatment, examination, and testing may be medically advised.

I just need my medications refilled and you make me come in at least once a year to refill them, why are they not part of my yearly visit.

Medications such as birth control are considered “preventative” when used for contraception (not period control, etc.). Other medications, such as cholesterol, depression and blood pressure medications may be considered as part of the preventative exam if the provider is refilling because you have been



stable and they do not require additional testing outside the regular annual screening laboratory examinations. However, other medications such as diabetes, hormone replacement, thyroid, etc. require specific testing to determine therapeutic levels and adjust dosages, as appropriate.

When specific testing is required and therefore additional clinical decision making is required, then the provider is “treating” a problem and this is not within the scope of preventative wellness examinations. Our providers try to be accommodating for you and accomplish all of this in one visit in consideration of your time, rather than having you come back for an additional visit.

Why can't you just refill my prescription without making me come in for a visit?

A prescription medication requires a prescribing provider's license to be sent. The Food and Drug Administration (FDA) as well as the Drug Enforcement Agency (DEA) determine which medications require a prescription. A prescription must be written by a licensed medical provider. This is not a benign process, despite popular belief. The provider is attesting that they have examined the patient, reviewed their medical history, other medications and any relevant tests/examinations, determining that the medication is appropriate as well as the dosing instructions. General medical guidelines/standards are that a patient needs to be examined at least annually for medication refills. For certain medications, more frequent visits/testing may be required. This is at the sole discretion of the prescribing provider in order to receive additional refills.

My insurance says that if my provider “codes” the services as preventative/screening, then it will be covered. Why won't you change it, so it is covered?

When speaking with your insurance customer service, they are looking at specific plan guidelines for benefit coverage. They are not speaking to your health history, medication management, etc. We have to follow regulatory guidelines in what is considered “screening” vs “diagnostic” and code as such. A common example is with thyroid and cholesterol management. Once you have been diagnosed with a thyroid disorder and/or high cholesterol, laboratory examination/testing are no longer considered screening, unless you no longer have the diagnosis. Testing for hormone imbalance is another area frequently confused with “screening” vs “diagnostic.” While your provider may state that they want to “screen” your hormones for hormone imbalances, due to your areas of concerns, this is not preventative screening. They are “screening” your hormone levels as part of diagnostic testing regarding your concerns/complaints.

For additional information on well woman preventative examinations:

https://www.womenspreventivehealth.org/?_ga=2.111320578.781714470.1675017303-2070372091.1675017303

<https://www.aafp.org/family-physician/patient-care/prevention-wellness.html>