



Auburn Family Medical Center, Inc., P.S.

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Routine Physical Exam

A number of our patients have inquired about charges for routine physical exams and office visits during the same visit.

Routine physical examinations are defined by insurers as preventative or wellness visits. These visits include questions about your current health status, determination of risks for health problems and diseases, a physical examination for the same, and recommendations for screening such as cancer screening, as well as lifestyle changes. **Prevention does not include addressing specific, individual health problems, whether brought up by the patient or the physician.** These health problems, injuries and diseases take extra time and effort, and they fall outside the realm of wellness visit.

As such, please understand that when we address additional medical problems during your routine physical exam, an additional office charge may be added. Most insurers cover our attention to these additional services, but some may shift an additional co-payment back to you. We are writing this so you are not surprised should this happen.

Although we don't always have time to address everything at one visit, we will do our best to address what we feel we can, without sacrificing quality, within the time scheduled for your appointment. We ask that you please be prepared for charges that reflect the nature of the visit.

ROUTINE PHYSICAL COVERAGE LIMITATIONS

You have made an appointment for a Routine Physical Examination. It is the responsibility of the insured to be aware of the coverage limitations of his or her insurance plan prior to this examination. Any charges not covered by the insurance carrier will be the responsibility of the patient.

In addition to your Routine Physical Examination, it may be necessary to provide a problem oriented service according to our providers. In the event that you have not met your deductible you may be responsible for a portion of this additional service and a co-pay may be applied.

PRINT PATIENT NAME

DATE OF BIRTH

PATIENT SIGNATURE

DATE

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