DICKERSON PEDIATRICS Well-Exam Visit Helpful Facts

Many insurance companies limit the amount they will pay for well-exam visits, immunizations, and procedures. To avoid unpleasant financial surprises, here are some quick helpful facts:

- Read your insurance policy carefully to determine if there is a maximum benefit amount for preventative services. If you have trouble understanding what the policy states, call your insurance company's customer service department. Often this phone number is listed on the back of your insurance card. If you discover you have a maximum benefit amount for preventative services then determine that amount and the remaining balance. Variations from the recommended immunization schedule may require additional provider visits to the office and may require additional insurance co-pays or deductible balances. Some insurance companies will not pay for additional provider visits due to an alternate immunization schedule. The parent is responsible for all costs not covered by the insurance company.
- If your insurance company has decided that they will not pay for a procedure performed in our office, the payment will be your responsibility. Our providers practice medicine based on their extensive training, experience, and recommendations of the American Academy of Pediatrics. These guidelines detail the recommended screening tests and immunizations pediatricians are expected to carry out at each well-exam visit through the age of 18. Well-exam visits may not be covered after certain ages; please verify any limitations with your insurance plan. If you are concerned about your coverage, please contact your insurance company prior to your child's visit to see if the following common well-exam procedures are covered (the middle column refers to the codes submitted for payment to your insurance company):

Procedure	Code	Charge
Finger/Heel Stick Blood Sample	36416	\$17.00
Hearing (Audiometry)	92551	\$29.00
Vision	99173	\$25.00
Skin Test (TB)	86580	\$25.00
Development Screen (Mchat,	96110	\$55.00
Vanderbilts, Connor Scales, ASQs)		

- Often times during a well-exam the provider may determine that the patient is too acutely ill to perform an adequate well-exam; and therefore, will treat the patient and require him or her to return to the office for the well-exam visit when the patient is well. Additionally, if the patient has a chronic issue that needs to be discussed during a well-exam then, at the provider's discretion, either an additional exam will be charged to the patient's insurance or the patient will be required to return to the office another day to discuss the issues when proper time is allotted to cover the topic. As a medical practice who is in contract with your insurance provider, we are by law not permitted to write-off any copays, deductible, or coinsurance balances acquired by services rendered by Dickerson Pediatrics.
- Additionally, our office policy requires that every patient to be seen and evaluated by a provider on the same day any vaccine or injectable medication is given. This policy includes but is not limited to Gardasil, Cervarix and Depo-Provera. This may result in additional co-pays, deductible, or coinsurance balances according to your insurance coverage.