

**INFORMATION REGARDING THE AFFORDABLE CARE ACT AND
PREVENTIVE HEALTH SERVICES (WELL VISITS)**

We want you to receive preventive services--health care that may lower your risk of illness or injury. The Affordable Care Act (ACA) requires many health insurance plans to pay for some wellness care (categorized broadly as evidence-based screenings and counseling, routine immunizations, childhood preventive services, and preventive services for women and men), but it does not cover all the wellness care you might need. We want you to know about your ACA benefits and how we can help you get the most from them.

At your wellness visit, our staff will ask you some questions about your health and history. We may also order screening tests appropriate for your age, sex, and life situation or tests pertaining to your medical conditions. The latter are not part of the screening tests covered under the ACA. They may require a copay and are subject to your deductible.

By the ACA definitions a "wellness" visit does not deal with new or existing health problems such as diabetes or hypertension. We may need to either schedule a longer appointment or additional appointments to evaluate medical problems. A separate charge applies to these services whether provided on the same date or on a different date the wellness visit.

It is your responsibility to understand your benefit package. We do our best to code your visit accurately. Please do not ask us to change the diagnosis code after your appointment unless it is our error.

THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS READ THIS DOCUMENT.

Print Patient Name _____ DOB _____

Sign Patient Name _____ Date _____