



12411 Hymeadow Drive, Suite 3F, Austin, TX 78750 Phone: (512) 250-1997 Fax: (512) 250-1529

Preventative Visit Charges

The Providers and Staff at Kangos Pediatrics work hard to give the highest quality care by providing yearly physical examinations or Well Child Care Visits. Most insurance companies cover one wellness exam per year at no cost to the patient, including certain test to detect disease in early stages or to prevent disease.

Unfortunately, most insurance companies **will not** cover tests unrelated to the physical and can choose to not cover the full cost of the office visit for separate health concerns discussed during an exam.

Some examples of the treatments or discussions that **may not be covered** in a physical or well examination:

- Non-scheduled, but necessary immunizations [TB (PPD) tests needed for work, etc]
- Laboratory tests for illness, injury or chronic conditions
- In-office procedures (ear wax removal, foreign body removal, rapid strep test)
- Addressing new or ongoing health problems (rash, acne, cough, ADHD)
- Tests that are not normally needed due to a patient's age or health risk

Each insurance company decides what will be paid on a case-by-case basis, and decisions made cannot be predetermined by our office. If you have questions about what is covered under your health insurance plan for routine physicals or wellness exams, please contact your insurance company or Human Resources Department.

Any charges not considered as part of a routine physical or wellness exam must be billed separately and any items or services not covered will be billed to the patient.

We apologize for this inconvenience and appreciate your understanding that we must follow the insurance company billing guidelines in order to submit claims on behalf of our patients.

Please acknowledge:

I understand I may be responsible for any items or services that my insurance company may determine is not a part of a routine physical or wellness exam.

Patient Name (print): _____

Parent or Guarantor

Signature: _____ Date: _____



Preventative vs Acute Care FAQs

Congratulations on scheduling a preventative health visit, a vital step toward better health!

A medical evaluation is just as important when you feel healthy as it is when you are ill. Preventative care is health care performed as a precaution to prevent diseases from developing or to detect diseases at early stages. Preventative care should be an integral part of your annual planning for your child's health.

Below are frequently asked questions (FAQs) to help you understand how health plans mandate what is considered “**preventative**” and what is considered “**active or ongoing**” health care. These distinctions affect what services your health insurance will cover and what you may be responsible for paying.

What is covered under the preventative care benefit?

Depending on your insurance plan, services defined as “preventative care” are likely to be covered at no cost to you. Preventative care is the periodic routine assessment of your child's health to avoid future illness.

Those services include:

- A review of your personal and family history (this information can guide medical and preventative care)
- A comprehensive physical exam tailored to your age
- All routine CDC recommended vaccinations
- Routine Developmental Screening

What is the difference between preventative care and acute or ongoing care?

Ongoing or acute care involves the diagnosis, treatment, and monitoring of specific diseases and conditions.

Examples of ongoing or acute care include:

- Diagnosing or addressing a new condition that is identified during your child's physical exam, such as: speech delay, behavioural concerns, skin disorder, upper respiratory infection, or urinary tract infection.
- Monitoring or treating a condition you already have, such as ADHD or Asthma, which may involve refilling medications. While this can be done at a preventative health visit for your convenience, commercial health plans and Medicaid, mandate that there be a specific additional charge for these services.



Preventative vs Acute Care FAQs - continued

- Some vaccines are routine and others are only needed for specific situations. Vaccines that are not considered routine and are only needed in certain situations such as traveling internationally will require specific payment. Routine vaccines are usually covered by your health plan.
- Private Pay, Uninsured or Underinsured Vaccines - if you are considered underinsured or your policy lacks adequate benefits for routine vaccine coverage, you may be eligible to receive discounted vaccines from the state program Texas Vaccines for Children, or TVC. Please ask about the screening process to see if you qualify for discounted vaccines. These are offered at a state mandated fee of \$14.85 per vaccine (per needle stick).
- Every health plan has certain laboratory tests that it covers at 100% and others that are considered non-routine and may be charged to you or as part of your deductible or coinsurance, such as Rapid Strep Tests, Throat cultures and Urinalysis or culture.

What happens if I come in for a preventative visit and there is a need for diagnosis and treatment of an acute (ear infection, upper respiratory infection) or an ongoing (ADHD or Asthma) condition during the same visit?

You may see your provider for a Routine Well Child Exam (preventative care) but also discuss a new or ongoing health concern such as asthma, or a new condition discovered during your physical (such as a urinary tract infection) in the same visit.

Although the focus of the preventative health visit is keeping you healthy, we make every attempt to address other concerns during your visit, because we understand it is the most logical and convenient time to address your health issues.

Depending on the list of issues you would like to review and your doctor's schedule for the day, your doctor might ask you to schedule a separate visit at a later date.

How will I be billed if the above scenario occurs?

In order to comply with insurance billing guidelines, we must bill separately for these services. In cases like these, the acute or ongoing care part of the visit might generate an additional copay or count toward your out of pocket expenses: deductible or coinsurance.

What can Kangos Pediatrics do about this?

Unfortunately, we cannot change this practice. Kangos Pediatrics has contracts with many insurance companies and we must follow their rules.

We apologize for this inconvenience to you and appreciate your understanding that we must follow insurance company billing guidelines in order to submit claims on your behalf.

Who do I contact if I have questions about my benefits?

Questions related to your benefits should be directed to your insurance company or your employer's Human Resources department.

