



DON FORD, M.D.
Diplomate of the American Board of Internal Medicine

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Diplomate of the American Board of Internal Medicine

PREVENTIVE MEDICINE

WAIVER FORM

Your appointment today is scheduled as a physical. Your insurance company may not cover all of the procedures that are recommended by the American Cancer Society, American Heart Association, American College of Physicians, etc. for screening asymptomatic patients. In addition, some insurance companies have restricted coverage for wellness care or will not cover a physical.

Your physical will be coded as a "preventive medicine" visit for insurance purposes. The physicians here at **Internal Medicine Associates of Sugar Land (herein IMASL), Dr. Ford and Dr. Holster**, are unable to change the diagnostic codes after your examination. Changing the diagnostic codes after the date of service may be considered as insurance fraud.

NOTE:

The business office of **IMASL** does not verify insurance benefits for physicals/preventive medicine exams. It is the patient's responsibility to verify insurance coverage for physicals/preventive medicine exams and to inform the doctors of any "special coding requirements" during the examination.

AUTHORIZATION:

IMASL has notified me that my insurance plan may deny some or all payments for the services related to a physical/preventive medicine exam. I have been notified that it is my responsibility to determine my insurance coverage for routine physicals/preventive exams. If my insurance company denies payment, I agree to be personally and fully responsible for payment.

TODAY'S DATE

PATIENT'S PRINTED NAME PATIENT'S SIGNATURE

IMASL REPRESENTATIVE PRINT REPRESENTATIVE'S SIGNATURE

REVISED 1114/08