



RE: ANNUAL EXAM

Patient

Name: _____

I have been advised by Women's Health Care of New England that some insurance companies will not pay for routine annual exams or preventive visits. Today's visit was scheduled as an annual exam, and will be billed to my insurance as such. If the carrier makes the determination that my visit is not covered, I understand I may be personally responsible for these charges and will be billed.

Patient's Signature

Date