



Kavita Willesen, MD

## H&Ds

### HIGHLIGHTS AND DETAILS

#### Enhanced Concierge Care Benefits Included as Part of the Annual Fee

These offerings are not covered by Medicare or by other insurance plans. My practice size is smaller which allows me to provide you with the following membership benefits:

**Improved communications.** My goal is to provide support in understanding personal values, life goals, and preferences regarding current and future medical care for you.

- **During business hours.** When you call my office there will be no phone tree to navigate. I may not be able to answer if I am with a patient. In the event that you need to leave a message, your phone call will be returned promptly. I will be using a communication platform that is HIPAA compliant and will allow me to receive immediate notification if you call the office and I am not available. If you deem your problem "urgent" I will make every effort to speak to you at the time of your call.
- **My personal cell phone number will be provided to you.** This allows easy and direct communications for urgent problems that occur outside of my regular office hours. I will use my reasonable best efforts to be available to you when you are ill or injured to assist in your care. **However, for emergencies, always call 911 first.**
- **Convenient email and text communication for non-urgent health issues or questions.** For non-urgent questions or for follow up to a visit, you can email me directly, and you will receive a response promptly (usually within 24 hours). Alternatively, you may send a text message via my cell phone or my office number if a brief communication is appropriate. Please note, because email and text communication are not always secure, you should use discretion when choosing topics to discuss via these platforms. Your patient portal is the best way to communicate securely and confidentially.

**Little or no office waiting room time, and longer appointments.** Office visits will start promptly with little to no waiting in a wait or exam room. Appointments will generally be scheduled for approximately 30 minutes, but some appointments (for example, a Comprehensive Annual Health Assessment) will be scheduled for approximately 60 minutes. My aim is to provide you with ample time to thoroughly address all your questions and concerns, regardless of the reason for your visit.

**Extended office hours.** Office visits are best scheduled during business hours. However, should you require an occasional visit outside of my usual office hours, I will certainly do my best to reasonably accommodate you. Telehealth visits will be available outside of business hours, if preferred.

**Strong focus on preventive medicine and long-term health and wellness.** As part of my commitment to your long-term health and wellness, my philosophy is to educate you about the importance of fitness, weight management, healthy living and, in addition to the clinical services I already offer through my practice, I will assist you to identify and evaluate wellness providers and offerings. This will support your effort to take an active role in managing and maintaining your good health.

**Personalized hospital care.** Should you need to be hospitalized, I will make myself available when I can to communicate with you and to serve as an advocate on your behalf. If you wish, unless hospital policy or protocol does not allow, I will do what I reasonably can to remain involved in your care, including by making courtesy visits and/or communicating with the hospitalists or other attending physician who is providing services to you.

**Independent or skilled facility care.** For adult patients in an independent or skilled nursing facility, on a temporary or permanent basis, I will make myself available when I can to be involved with your care, through periodic site visits and/or communication with those involved with your care, on a case-by-case basis. I will also make myself available to your family to address any concerns and offer counsel.

**House calls.** If you are ill and unable to come to the office, but not homebound, a house call may be offered at no additional charge beyond an office visit fee. However, the need for each out-of-office visit will be determined on a case-by-case basis, at my discretion.

**Care for visiting relatives and/or friends.** Should your out-of-town family or friends become ill during a visit to the Salt Lake City area, I will be happy to see them in my office and assist with their medical care. I will treat them as though they were a member of my practice.

**“Virtual” consultations and long-distance care.** Whether you are on a brief vacation, living some of the year in a second residence, or otherwise unable to come to the office, I will offer a “virtual” consultation as determined on a case-by-case basis, at my discretion and subject to applicable state law requirements. However, if in my judgment you need to be seen by a local physician, you will be encouraged by me to seek medical attention. I will communicate with you directly, as well as with your treating physician as needed, to support the coordination of your care on health issues that may arise.

**Hearing screening.** As part of my commitment to preventive care, I will provide patients with an annual hearing screening exam, regardless of any reported symptoms.

**Quarterly newsletter on topics relevant to your health and well-being.** I will provide seasonal newsletters on medical subjects of interest.

**Travel medicine consultation.** I will offer guidance on CDC recommended inoculations and/or precautions to be taken while traveling.

## Comprehensive Annual Health Assessment

In my ongoing efforts to assist you in adopting and maintaining a healthy lifestyle and optimizing your quality of life, you will be encouraged to schedule a comprehensive annual health assessment, regardless of condition or necessity, each year. It will include a thorough examination and an appropriate array of screening tests based on age, health status and risk factors. There is no one-size-fits-all approach when it comes to prevention and treatment. Depending on your particular health situation, additional tests (such as blood tests, a colonoscopy, mammogram, etc.) may be recommended. These will be billed by the performing entity, and you or your insurer will be responsible for payment of these tests. I will use the results of our exam to help you develop a plan for the year to improve health and fitness and to address any new or existing health goals. Every patient is advised to have an annual evaluation.

The membership fee does not apply to the Welcome to Medicare assessment or to the Annual Wellness Visit. Portions of this comprehensive annual health assessment and associated tests may be “covered” services under Medicare and other commercial insurance plans and will be billed accordingly. The annual membership fee applies only to non-covered components of the comprehensive annual health assessment.

## My Staff

My staff is an important part of your experience with my office. They not only have the expertise to advocate on your behalf but will assist you in navigating through other aspects of the medical community when necessary.

## Insurance Information

### Commercial Insurance Patients

**Office visit charges are not included in your annual fee.** I intend to remain an in-network provider for many PPO insurance plans. I will bill insurance for all covered services; patients will be responsible for deductibles, co-pays and exclusions in accordance with individual insurance plan guidelines. It is my intention that no insurance-covered medical services are included in your annual fee.

As medically indicated, I will make it a priority to refer you to in-network physicians for any necessary consultations and to in-network facilities for diagnostic tests and hospitalizations. Any services rendered by these physicians or facilities will be billed by the performing entity.

### Medicare Patients

I will continue to submit claims to Medicare and to your supplemental insurance on your behalf. Patients will be responsible for deductibles, co-pays and exclusions in accordance with individual insurance plan guidelines. The annual membership fee is intended to only include services as described herein that are not covered by Medicare and will not be paid for or reimbursed by Medicare.

## Annual Fees & Instructions

Please see the Membership Agreement form for annual fees and instructions.