ABOUT ELECTIVE EXECUTIVE PHYSICAL PROGRAMS

WHAT IS AN EXECUTIVE PHYSICAL?

Executive Physicals are top-to-toe physical exams that include a detailed medical history along with comprehensive lab screenings. These exams are performed in addition to the annual physical that is covered by your primary health plan. They can be an important way to benchmark your current health status.

HOW IT WORKS

The Ultimate Health insurance policy provides coverage toward these elective pre-packaged Executive Physicals up to your plan’s stated benefit limits, generally for the member and enrolled spouse. You may choose your own Executive Physical location, or we can help. Contact Member Services to access options that meet your preferences in your area.

HOW TO FILE EXECUTIVE PHYSICAL CLAIMS

With this benefit, members pay for the Executive Physical in full and then obtain reimbursement through Ultimate Health.

Submitting a claim for an Executive Physical is similar to submitting a medical claim for services or cost-sharing not covered by your primary plan. Like other claims, Ultimate Health does not pay for Executive Physicals at the time of scheduling; the plan will only reimburse after receipt of actual services once your patient responsibility amount has been determined.

To ensure claims have the sufficient information for processing, follow these guidelines:

If insurance is accepted for a portion of the Executive Physical:

» Submit the detailed receipt you receive from the facility/center to your primary and/or secondary insurance first – or if they are willing to do so, ask the facility/center to submit the claim on your behalf. Typically primary insurance covers certain tests that fall within preventive care standards of care for your age.

» Receive an Explanation of Benefits (EOB) from your primary or secondary insurance. This should include details on what is covered and what remains your responsibility.

» Submit the claim for reimbursement along with the EOB as supporting documentation.

If the facility/center is in-network, the EOB will show the remaining member responsibility at in-network rates.

If the facility/center is out-of-network, you will receive a balance bill that you should submit along with the EOB.

» Also provide the date of service, amount claimed, signature and current date.

A Note on Concierge Services: If you have a concierge primary care service that includes this type of physical in association with their fee, the Ultimate Health Executive Physical benefit can be used toward that cost as long the concierge practice provides a detailed, itemized invoice that includes the services performed. An EOB will also be required if the practice accepts insurance and the elective physical components were run through your primary insurance. Please be advised that ArmadaCare cannot reimburse for concierge fees alone, nor can we reimburse this fee if you did not have the executive physical done.

If insurance is not accepted by the facility/center:

» Submit an Ultimate Health claim for reimbursement along with an invoice or a detailed receipt and documentation (letter or signed contract) showing that payment is your responsibility and that the facility/center does not accept insurance payment.

» Include the date of service, amount claimed, signature and current date.