



Andrew M. Bernstein, DO

H&Ds

HIGHLIGHTS & 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/my office staff to provide you and/or your family with the following membership benefits:

Direct communication to me or my assistant during business hours. When you call my office during office hours there will be no recordings or answering services to navigate only real people to take your call, with a real concern for your health and well-being. In the event that you need to leave a message on my recording, your phone call will be returned promptly. 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 should an urgent matter arise outside of my regular office hours. I will use my reasonable best efforts to be available off-hours to help coordinate your care. You may also send a text message to my cell phone for truly urgent issues outside office hours. **For true emergencies, however, always call 911 first.**

Convenient communication for non-urgent health issues or questions. Please use the patient portal to communicate with me for non-urgent health issues and questions. I will send you a response within 24 hours during the business week. This is the best way to communicate securely and confidentially.

Little or no office waiting room time, and longer appointments. Office visits will start promptly minimizing wait times. Appointments will generally be scheduled for approximately 30 minutes, but some appointments (for example, a Comprehensive Annual Health Assessment) will be scheduled for approximately 60-90 minutes. My dedicated preparation for your appointments in advance, makes for a smoother patient experience which includes ample time to thoroughly address all your questions and concerns, regardless of the reason for your visit.

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. If you are hospitalized at Naples Community Hospital (NCH), I will be able to use the EPIC medical records system through the NCH platform and will continue to maintain my NCH staff privileges. This will enable me to easily assess all hospital consults and testing and help you navigate the inpatient setting in a timely manner. Being hospitalized can be overwhelming and anxiety provoking, I will be able to alleviate some of that stress with direct communication regarding the progress of your admission.

Extended office hours. Office visits are best scheduled when the full complement of staff is available. However, should you require an occasional visit outside of my usual office hours, I will certainly do my best to reasonably accommodate you. My office is in close proximity to my home to specifically help to better serve my patients, should the need arise.

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, and healthy living and nutrition. 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.

You will always be seen by me. Unlike traditional primary care practices where you may need to schedule an appointment with the first available doctor, you will always be seen by me. During my occasional absence from the office, a trusted colleague will be available for urgent issues.

“Virtual” consultations and long-distance care. Whether you are on a brief vacation, living some of the year in another 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.

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

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 and reminded by my staff to schedule a Comprehensive Annual Health Assessment, regardless of condition or necessity, each year. This is a comprehensive annual visit, unrelated to any illness or injury. It will include a thorough examination and an appropriate array of screening tests based on age, health status, family history and risk factors. Each person is unique and 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 any annual wellness checkup. 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. However, 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 and 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 for Medicare-covered services. 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.