

## Sports Physicals in the RHC

### Weigh the Opportunity Against the Risk



During this time of year and on into the summer months, one of the questions being asked is how do we handle “sports physicals”? With all that is dependent upon the sports physical, RHCs need to consider doing the annual physical at this time. Most insurance companies pay for an annual physical as well as State Medicaid pays for the annual physical if all the components of a physical are completed. Clinics need to weigh the risk involved in the type of physical that is being completed. Many times this is the only time these kids come to the clinic for services and the Clinic should address many other concerns with the kids and use this time as a “teaching moment” for these kids.

With that said and IF the clinic chooses to do the abbreviated “sports physical” that is seen in many locations for a nominal fee, Clinics need to know what their contract is with the patients’ insurance companies. If the Clinic is charging the patient \$X and the request is made that it be sent to the patient’s insurance and the Clinic participates with that insurance company, the Clinic is obligated to send that service to the insurance company and accept the payment received. Each State Medicaid has their own rules to whether the Clinic can charge the patient or not and each Clinic needs to check with their Medicaid payer to make this determination. Many States will require that the patient be informed “in writing” that the service will not be paid for by Medicaid and it will be the patient’s responsibility to pay.

In the RHC, there is to be only one fee schedule for all patients. When the RHC advertises a “sports physical” for \$X, then we are obligated to charge all patients that amount for the same service during that period of time. The Clinic should have a list of services provided as the “sports physical” to inform the patients what the service includes. Thus, one can conclude that if any patient would call for an appointment for a “sports physical” the same charge would apply regardless of payer class or which patient it may be.

As for going to the schools to perform the “sports physicals” after hours of the school or the clinic, this practice is still happening, however, there is much less of this than there ever used to be because of the risk involved for both the patient and the Clinic. The best practice would be to perform the patient’s annual physical and then complete the sports physical paperwork, thus allowing the Clinic to send the service claim to the insurance companies and/or State Medicaid as the patient’s annual physical.

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