

FREQUENTLY ASKED QUESTIONS (FAQs)

MEI-LAI LUCAS, MD

- 1. What services are provided as a part of my annual fee?** Please see the enclosed “Highlights and Details” page for a complete list of offerings and amenities.
- 2. What is the mission of my concierge practice?** I will continue to provide the highest quality medical care, emphasizing a proactive, comprehensive approach to disease prevention and health management while nurturing and strengthening our physician-patient relationship. I want my patients to be completely satisfied with every aspect of their care.
- 3. What practice changes are you making?** In my concierge practice, I schedule only 10-12 patients in an entire day. This means appointments start promptly and I can spend more time with you. If a problem requires an extra 30 minutes of evaluation, I will accommodate you. I want to be your health advocate. My belief is that more time with your physician and better access to your physician means better care.
- 4. What are your hospital affiliations/access?** I have affiliations and access with California Pacific Medical Center, Marin General Hospital, St. Mary’s Hospital and UCSF, but my patients can be hospitalized anywhere. While you are hospitalized, a trusted colleague who is a physician specializing in hospital care (hospitalist) will function as the admitting physician and will have primary responsibility for your hospital care. I will continue to communicate with the attending hospitalist and advocate on your behalf.
- 5. Where are you located?** My primary office is tentatively at 2345 Balboa Street (at 25th Ave.), San Francisco, CA 94121. I can also see patients in Marin at 1000 S. Eliseo, Ste. 200, Greenbrae, CA 94904. If my office location changes within San Francisco I will keep you promptly informed of the updated address.
- 6. Who will cover for you when you are not available?** My goal is to be available 24 hours a day, 7 days a week. There will be infrequent occasions when I am out of town or otherwise unavailable. In these situations, Mei-Ling Fong, MD will cover for me. For practical reasons, I reserve the right to designate another qualified provider to perform any and all services should the need arise.
- 7. Do I still need health insurance if I enroll with you?** Yes. My new medical practice will not take the place of general health insurance coverage. My practice is a primary care medical practice, not a health insurance program. You are advised to continue your HSA, PPO, Medicare or other insurance program. If you have an HMO health plan, I will no longer be a participating physician. For further details on your options, please call the office directly at (415) 751-1446.
- 8. Will my insurance still be billed for my office visits?** Yes. I will bill your insurance company directly for office visits. If your insurance carrier/plan requires a co-pay, I will collect it at the time of service. Office visit charges with the exception of your Annual Wellness Exam, are not included in your annual concierge fee.
- 9. Will you still be a Participating Provider for Medicare?** Yes. My status with Medicare will be unchanged. I will continue to bill Medicare as well as your supplemental insurer on your behalf, as required by law.
- 10. Do you bill Medicare for the annual fee?** No. The annual fee only includes services that are NOT covered by Medicare (or any other payor) and, as such, cannot be paid for or reimbursed by Medicare. I will bill Medicare for your sick visits and for any additional services performed at my practice that ARE covered by Medicare. For patients with Medicare Part B, I will bill Medicare for your “Welcome to Medicare” preventive visit (within the first twelve months of Medicare enrollment) and yearly “Wellness” visits.
- 11. Will my private insurance reimburse my annual fee?** It is unlikely that this service will be reimbursable. However, some Flexible Spending Account and Health Savings Account plans may pay for all or part of the annual fee.

Members are advised to consult their human resources representative at their place of employment, or their FSA or HSA plan managers.

12. Is the annual fee tax deductible? The fee is a medical expense and may be deductible. Patients are advised to consult with their tax consultant to clarify qualification in their particular circumstances.

13. What about lab, x-ray, specialists' fees and hospitalization? Your annual fee pays for membership in the practice, for your Annual Comprehensive Wellness Exam, and for many other amenities listed on the "Highlights & Details" page. All other procedures and services not performed in my office will be billed by the performing entity and will likely be covered by your insurance.

14. Does the Annual Exam include a well-woman exam? Yes. The Annual Exam includes screening pap smears, and I am able to handle your routine gynecologic care when appropriate.

15. What if I have an emergency? *If you have a life threatening emergency, call 911 immediately.* After you call 911, please call me. I will assist in the coordination of your emergency care thereafter.

16. What do I do if I become ill while traveling or away on an extended vacation? *Call 911 if you have a life threatening emergency.* Then call me. However, call me first if the problem is minor. With the exception of a few controlled substances, most prescriptions can be ordered anywhere in the country. If necessary, it may be possible for me to find you a resource where you are for care. If you seek care at an emergency room or urgent care center out of my area, I request that you have the doctor seeing you call me for coordination. I will be readily available for phone consultation with you and/or other health care personnel.

17. What if I need to see a specialist or a surgeon? As always, my patients are free to see any specialist they wish given the constraints of their insurance plans. I am available to help you decide which specialists to see and to coordinate such consultations. In this way the most appropriate resource is used, the earliest arrangements are made, and your applicable medical information is sent in advance of your specialist visit.

18. Will I be required to pay our annual fee even if I do not use your services? Yes. Paying your annual fee allows you to be a member of my practice whether you are sick or well. However, my practice is not an insurance company and does not cover the medical services you receive. I strongly encourage you to utilize the amenities offered, including your Annual Wellness Exam, regardless of your state of health.

19. What happens if I move out of the area after I enroll? If you move and wish to secure a new primary care physician, the annual fee will be refunded on a pro-rated basis. However, once the Annual Wellness Exam has been completed, there will be no refund. A copy of your records will be sent to your new physician upon receipt of a signed release. This release of records is required by law.

20. Can I wait and enroll at a later date? By design, my practice is a membership practice with a limited enrollment. Once that enrollment limit is reached, a waiting list will be established. Every effort will be made to accommodate interested patients, but the enrollment limit must be honored in order to continue to provide the highest standard of personalized care and service to all my patients. Please note that each service year will run from January 1st through December 31st.

21. What are Dr. Lucas' credentials?

- Board certified in Internal Medicine
- Medical practice in San Francisco Bay area – 20+ years
- Undergraduate training - Pepperdine University
- Graduate - University of Oklahoma College of Medicine
- Residency - Brown University
- Chosen as a Bay Area "Top Doctor" from 2011-2019

HIGHLIGHTS & DETAILS

MEI-LAI LUCAS, MD

Services Included as Part of Annual Fee:

- ◆ **Comprehensive annual preventive medical examination.** This is an extended wellness exam, not in connection with any illness or injury, and will include an extensive array of screening tests and examinations. The exam will include a detailed physical examination and EKG. Additionally, I will review your medical history and risk factors. A comprehensive lab panel including urinalysis, complete blood count, lipid panel, liver profile, kidney profile, blood sugar, electrolytes and a thyroid assessment will be included in the exam. I will also offer a well-woman exam for my female patients and a PSA test for men if it is appropriate.

All of the above testing can be done in the office and will be included as part of your annual fee. Your annual membership fee is for non-covered services only that can be performed in the office as described above. Depending on your particular health situation, appropriate additional tests may be recommended, and you or your insurer will be responsible for payment of those tests. Copies of all findings will be supplied to you. You will be encouraged to schedule this annual exam each year. I hope that by offering an annual comprehensive wellness exam as part of your annual fee, it will encourage you to proactively safeguard your health on a regular basis. This exam enhances the physician-patient relationship and creates a solid foundation for future care. It is an investment in your most important asset--your health.

- ◆ **Same-day or next business day appointments.** Appointments will be available regardless of the severity of your medical issue.
- ◆ **Little or no office waiting time, and typically longer appointments, when needed.** Annual Wellness Exam appointments will be scheduled for 60 minutes and all other appointments for 30 minutes allowing adequate time to answer all of your questions and address all of your needs.
- ◆ **Strong focus on preventive medicine and long-term health and wellness.** My philosophy is to teach and educate you on your personal medical needs and risks. This will empower you to take an active role in managing and maintaining good health
- ◆ **Direct phone contact with me or my assistant, during office hours.** All phone calls will be returned promptly. However, if you deem your problem “urgent” I will make every effort to speak with you at the time of your call.
- ◆ **My personal cell phone number will be provided.** This will allow easy communication for urgent medical problems that occur outside of our regular office hours. You will easily be able to reach me directly to receive medical advice should an urgent health matter arise outside of regular business hours.
- ◆ **Convenient office e-mail access for non-urgent health issues or questions.** You will receive a prompt (usually within 24 hours) response. I want to be involved in all aspects of your care. We can communicate via email or phone to review emergency room and specialist visits or other quick/non-urgent questions that do not require a trip into the office.
- ◆ **End-of-life counseling visits with patient and family.** We will discuss viable options, legal choices, personal concerns, and will assist you in creating appropriate documentation for your wishes.

Insurance Information

Commercial Insurance Patients

Effective January 1, 2020, I will no longer be an HMO provider. I will remain an “in-network” provider for many PPO plans, Medicare, and most commercial insurance plans. For further information or questions, please contact our office directly at (415) 751-1446.

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. The referred services will be billed by the performing entity, and likely will be covered according to “in-network” fees.

Traditional Medicare Patients

With the exception of the annual fee, everything will remain the same with respect to Medicare. As a courtesy, I will continue to bill Medicare and your supplemental insurance on your behalf for Medicare-covered services. The annual fee only includes services that are not covered by Medicare and will not be billed to, paid for or reimbursed by Medicare. Medicare will also be billed for the “New to Medicare” preventive visit (for the first 12 months of Medicare enrollment) and yearly Wellness visits.

Annual Fee Effective January 1, 2020 – December 31, 2020:

- \$2,500/year = Individual (age 40 or over as of 1/1/20)
- \$4,800 /year= Adult Couple (age 40 or over as of 1/1/20)
- \$2,000/year = Individual (age 39 or under as of 1/1/20)
- \$3,800/year = Adult Couple (age 39 or under as of 1/1/20)
- \$1,000/year = Unmarried, dependent child of member (under age 26 as of 1/1/20)

INSTRUCTIONS:

Payments can be made annually or semi-annually. Payment of your annual fee may be made by check, Visa or MasterCard. Please let me know as soon as possible if you wish to enroll by contacting me through the information listed below. I will only be accepting a limited number of patients for my practice. If I reach capacity but you still wish to join then I will gladly put you on a waiting list.

**If you have further questions, please call 415-751-1446 or email us at rdmgmd@gmail.com.
We will be happy to assist you.**