

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

It is time to schedule your Medicare Annual Wellness Visit (AWV). This is a yearly appointment to create or update a personalized prevention plan based on your current health and risk factors.

What is an Annual Wellness Visit?

This visit is not a head-to-toe physical exam. Instead, it is a conversation with your healthcare provider to discuss:

- Your medical and family history.
- Your current list of medications and healthcare providers.
- Health screenings and immunizations you may need.
- Cognitive and functional assessments.
- Personalized health advice and goals.

Cost Information:

Medicare covers this visit 100% with no deductible or coinsurance. However, if you discuss new health problems or receive additional treatments during this visit, a clinic charge may apply for those services.

Appointment Details:

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Clinic Name/Address]

How to Prepare:

Please bring the following to your appointment:

- A list of all current medications, including dosages.
- A list of your current doctors, specialists, and pharmacies.
- The completed Health Risk Assessment form (if enclosed).

If you need to reschedule, please call us at [Phone Number] at least 24 hours in advance.

We look forward to seeing you and helping you stay healthy.

Sincerely,

[Doctor/Clinic Name]

[Clinic Phone Number]