

Staying Healthy Medicare's Preventive Services



Do you know that Medicare covers many preventive services in order to promote the health and well being of Medicare beneficiaries?

Preventive services like these can find health problems early, when treatment works best.

These services can also help keep you from getting certain diseases or illnesses.

The best way to stay well is to live a healthy lifestyle. You can be healthier and prevent disease by exercising, eating well, keeping a healthy weight and not smoking.

Taking advantage of Medicare's preventive services is just another way of taking good care of your health.

Are You Up-To-Date on Your Preventive Services?

Talk with your doctor to develop a personalized wellness plan.

**(See Back Page for Quick Reference Chart of
Medicare Preventive Services)**

Medicare-Covered Preventive Services

Services Medicare Covers with No Deductible or Coinsurance

Care/Screening	Service and Frequency
Welcome to Medicare Exam	One time within first 12 months on Medicare B
Annual Wellness Visit	Every 12 months after first year on Medicare B (NOT A FULL PHYSICAL)
Abdominal Aortic Aneurism	Once, if referred by doctor/practitioner due to risk factors
Alcohol Misuse Screening	Once a year, if do not have dependence on alcohol
Bone Mass Measurement	Once every 24 months for people who meet certain criteria
Cardiovascular (Heart) Disease Screenings	Blood test (Cholesterol, Lipids, & Triglycerides) every 5 years One doctor visit per year (May pay 20% co-insurance for office visit)
Colon Cancer Screening	Colonoscopy: Every 120 months (or 24 months if high risk) *
	Fecal Occult Blood Test: Every 12 months if age 50+
	Flexible Sigmoidoscopy: Every 48 months if 50+ (or every 120 months after previous screening if not high risk)
	Multi-target stool DNA test: Every 3 years if criteria met
Depression Screening	Once a year, if done in primary care setting
Diabetes Screening	Up to 2 tests per year if at high risk
Hep C Screening Test	Covered if meet at-risk criteria
HIV Screening	Once a year if at risk or if you request the test
Lung Cancer Screening	Annual CT scan for those at high risk
Mammogram	Once a year after age 40
Nutrition Therapy (Medical)	With referral if certain criteria met (diabetes, kidney disease or transplant)
Obesity Screening	Screening Once a year. Counseling covered up to 12 months if BMI ≥ 30
Pap Test/Pelvic Exam	Every 24 months (12 months if high risk)
Prostate Cancer Screening	PSA test every 12 months
Smoking Cessation	Up to 8 visits in 12 month period IF considered preventive
Vaccinations	Flu Shot: Once per flu season
	Hepatitis B Shot: Covered if at high or medium risk
	Pneumonia Shot: Usually once in lifetime
	Shingles Shot Not Covered by Medicare A or B. Check with Part D plan

* If Polyp is found or removed, you may have to pay 20% of doctor's services and a copay in hospital outpatient setting.

Services Original Medicare Covers with Coinsurances or Deductibles

(If you are in an Advantage Plan, check with your plan on costs)

Care/Screening	Service & Frequency	What You Pay
Barium Enema (Colon Cancer Screening)	Every 48 months if 50 or older (or 24 months if high risk)	Part B ded + 20%
Diabetes Self-management training	With doctor's order or referral	Part B ded + 20%
Glaucoma Screening	Annually if high risk (diabetic or family history)	Part B ded + 20%
Prostate Cancer- Digital Exam	Every 12 mo for men 50 +	Part B ded + 20%