

## Medicare Preventive Services Checklist

See <u>www.Medicare.gov</u> for more specific information on your covered preventive services.

Services	How Often?	Cost to Beneficiary
Annual Wellness Exam*	Once every 12 months after your first full year of Medicare Part B enrollment	Medicare pays 100%
"Welcome to Medicare" Preventive Visit	Once within the first 12 months that you have Medicare Part B	Medicare pays 100%
Alcohol Misuse Screening and Counseling	One screening per year. If doctor recommended, up to 4 face-to-face visits per year with qualified doctor	Medicare pays 100%
Abdominal Aortic Aneurysm Screening	One-time screening ultrasound. Referral provided at their Welcome To Medicare visit	Medicare pays 100%
Bone Mass Measurement	Once every 24 months for those with certain medical conditions	Medicare pays 100%
Cardiovascular Disease Behavioral Therapy	One visit per year	Medicare pays 100%
Cardiovascular Disease Screening	Once every 5 years	Medicare pays 100%
Cervical Cancer Screening (Pap Smear and Pelvic Exam)	Once every 24 months or every 12 months for those at-risk	Medicare pays 100%
Colorectal Cancer Screening	Frequency based on test for those age 50 and older. Ask your Doctor	Medicare pays 100% for most tests
Depression Screening	One screening per year done in a primary care setting (like a doctor's office) that can provide follow-up treatment and referrals	Medicare pays 100%
Diabetes Screening	One to two per year based on risk factors Ask your Doctor	Medicare pays 100%
Diabetes Self-Management Training	Education for those with diabetesdoctor must provide written order	20% of Medicare approved amount (subject to deductible)
Flu Shot	Once per Flu Season	Medicare pays 100%
Glaucoma Screenings	Once every 12 months for those at-risk	20% of Medicare approved amount (subject to deductible)
Hepatitis B Shot	Based on risk factors Ask your Doctor	Medicare pays 100%
Hepatitis C Screening	One-time for adults who do not meet the high risk definition, but were born from 1945 through 1965	Medicare Pays 100%
HIV Screening	Once every 12 months, or up to 3 times per year during pregnancy	Medicare Pays 100%
Lung Cancer Screening	Once every 12 months for ages between 55-77, current smoker or quit smoking within the last 15 years	Medicare Pays 100%
Mammogram Screening	Every 12 months for women age 40 and older	Medicare pays 100%
Medical Nutrition Therapy	Three hours per year for people with diabetes, renal disease or kidney transplant. Two hours per year after that	Medicare pays 100%
Obesity Screening and Counseling	Counseling is covered for anyone found to have a body mass index of 30 or more	Medicare pays 100%
Pneumococcal Shot	Usually once in lifetime	Medicare pays 100%
Prostate Cancer Screening	Once every 12 months	Medicare pays 100% based on test
Smoking and Tobacco Cessation	Up to 8 face-to-face visits per year	Medicare pays 100%
Sexually Transmitted Infection (STI) Screening/Counseling	Once every 12 months for those at risk	Medicare pays 100%

\* New for 2016 – Advanced Care Planning (ACP): During a person's Annual Wellness Visit, a patient can discuss advance directives, with or without completing relevant legal forms. An advance directive is a document appointing an agent and/or recording the wishes of a patient pertaining to his/her medical treatment at a future time should he/she lack decisional capacity at that time. There is no deductible or co-insurance for the ACP when furnished as an optional element of the Annual Wellness Visit. The doctor must code this optional service correctly.

Services highlighted are new or changed since last production.

For more information contact your local Office for the Aging or call the Health Insurance Information Counseling and Assistance Program (HIICAP) Hot Line at 1-800-701-0501