

Medicare-Covered Preventive Wellness Visits

January 2017



“Welcome to Medicare” Preventive Visit

Medicare will cover a **one-time** preventive visit during the first 12 months that you are enrolled in Part B. The “Welcome to Medicare” preventive visit is an opportunity for a complete assessment of your health and provides a baseline for future, personalized care with your doctor. This exam is a preventative physical exam and not a “routine physical checkup.”

How much does the exam cost?

This visit is **free** if your doctor accepts assignment.* If you are enrolled in a Medicare Advantage plan you may have to pay a copayment. Medicare will cover the exam if performed by a physician, physician assistant, nurse practitioner, or clinical nurse specialist. You must indicate to your provider that you want the “Welcome to Medicare Exam” when you schedule your appointment.

This exam **does not** include clinical Laboratory tests. If your doctor performs additional tests or services during this visit, you may have to pay a coinsurance and the Part B deductible will apply.

What should I expect during the exam?

During the “Welcome to Medicare” preventive visit your doctor will:

- Review your medical and social history
- Check your height, weight, and blood pressure
- Calculate your body mass index (BMI)
- Give you a simple vision test
- Review risk factors for depression and safety
- Offer to talk to you about creating advance directives, (legal documents that record your wishes about medical treatment if you are not able to make decisions about your care)
- Educate and counsel you to help you stay well

Following the visit, your doctor will provide you with a written plan explaining which screenings, shots and other preventive services you need.

Medicare will also cover a one-time **screening** EKG if you get a referral from the “Welcome to Medicare” preventive visit. You pay 20% of the Medicare approved amount after you meet the Part B deductible.

[*Provider accepts Medicare-approved amount as full payment.]

Annual “Wellness” Visit

If you’ve had Medicare Part B for longer than 12 months you can get a yearly “Wellness” visit to develop or update a personalized prevention plan based on your current health and risk factors. This visit will include a review of your medical and family history, check your height, weight, blood pressure, and other routine measurements, screen for appropriate preventive services and provide a list of risk factors and treatment options for you.

How often is it covered?

Medicare will pay for one “Wellness” visit **every 12 months**. If you got a “Welcome to Medicare” preventive visit in your first year, you will have to **wait 12 months** before you can get your first yearly “Wellness” visit. You don’t need to have had a “Welcome to Medicare” visit before getting a yearly “Wellness” visit.

How much does the exam cost?

You **pay nothing** for this visit if your doctor accepts assignment.* If you get additional tests or services during this visit that aren’t covered as part of the “Wellness” visit, you may have out-of-pocket costs.

What should I take to the exam?

You should bring the following when you go to your “Welcome to Medicare” preventive visit or “Wellness” visits:

- Medical records, including immunization records (if you are seeing a doctor for the first time)
- Family health history
- A list of current prescription drugs, how often you take them, and why.

For more information about preventive benefits covered by Medicare, call SHIIP to request your copy of *Medicare Preventive Benefits* fact sheet.

SHIIP is a resource for objective information and assistance on Medicare and related health insurance issues. For assistance please call 1-800-351-4664 (TTY 1-800-735-2942) for the SHIIP services in your area, or check the SHIIP website: www.therightcalliowa.gov