

PREVENTION MATTERS

Stay Healthy
Build healthy habits



Avoid ER
Reduce medical expenses



Senior Health Insurance Information Program



1-800-224-6330

This publication was created by the State of Arkansas Insurance Department and AR SHIIP Division, supported in part by grant number 1802ARMISH from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201.

VISIT:

Medicare Savings Program

www.access.arkansas.gov

Extra Help

www.ssa.gov/medicare/prescriptionhelp



LOCAL HELP FOR PEOPLE WITH MEDICARE

Medicare

Preventative Services 2021



Call Arkansas Senior Health Insurance
Information Program (AR SHIIP)

1-800-224-6330

Preventative Services For Older Adults



Medicare preventive visit Annual Wellness Visit Overview

This visit could include any of the following shots, screenings or counseling:

- Vaccines and immunizations
- Flu shots
- Pneumonia shots
- Hepatitis B shots
- Hepatitis C screenings
- Diabetes screenings and supplies
- Glaucoma screenings
- Depression screenings
- Cardiovascular disease risk reduction visits
- Heart disease screenings
- Abdominal aortic aneurysm (AAA) screening
- Pap smears, pelvic exams, and breast exams
- Mammogram screenings

PREVENTION

- Colorectal cancer screenings
- Prostate cancer screenings
- Lung cancer screenings
- HIV screenings
- Sexually transmitted infection (STI) screening and counseling
- Smoking cessation counseling
- Bone mass measurements
- Body mass index screenings and behavioral counseling
- Medical nutrition therapy
- Alcohol misuse screening and counseling

The Welcome to Medicare preventive visit is not a head-to-toe physical. This visit is also separate from the Annual Wellness Visit (AWV), which you can choose to receive once each year.



Costs

Original Medicare covers the Welcome to Medicare preventive visit at 100% of the Medicare-approved amount when you receive the service from a participating provider. This means you pay nothing (no deductible or coinsurance). Medicare Advantage Plans are required to cover this visit without applying deductibles, copayments, or coinsurance when you see an in-network provider and meet Medicare's eligibility requirements for the service.

During the course of your preventive visit, your provider may discover and need to investigate or treat a new or existing problem. This additional care is considered diagnostic, meaning your provider is treating you because of certain symptoms or risk factors. Medicare may bill you for any diagnostic care you receive during a preventive visit.