

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
Yearly Wellness Visit	Every 12 months after first year on Medicare B (Not a 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 (One or more may be covered)	Colonoscopy: Every 120 months (or 24 months if high risk) *
	Fecal Occult Blood Test: Every 12 months if age 50+
	Flex Sigmoidoscopy: Every 48 mo if 50+ (or 120 after previous 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 between age 15 – 65 or if at risk
Lung Cancer Screening	Annual CT scan for those at high risk
Mammogram	Once a year after age 40
Nutrition Therapy (Medical)	With referral if criteria met (diabetes, kidney disease, or transplant)
Obesity Screening	1:1 Counseling sessions may be covered if BMI \geq 30
Pap Test/Pelvic Exam	Every 24 months (12 months if high risk)
Prostate Cancer Screening	PSA test every 12 months for men > 50
Sexually Transmitted Infections	Screening every 12 months for those at increased risk or pregnant
Smoking Cessation	Up to 8 visits in 12 month period
Vaccinations	Flu Shot: Once per flu season
	Hepatitis B Shot: Covered if at high or medium risk
	Pneumonia Shot: Check with doctor if need 1 or 2 shots; both covered.
	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%