

# **Medicare Coverage of Preventive Services Under Health Care Reform**

The federal health care reform bill (now known as the Affordable Care Act) that was signed into law in March, 2010 makes several important changes to Medicare's coverage of preventive services.

## **Medicare Will Cover An Annual Wellness Visit and a Personalized Prevention Plan**

Starting in January 2011, consumers who have been on Medicare for at least 1 year are eligible for an annual wellness visit at no cost. During the wellness visit the medical provider:

- will create or update a screening schedule for the next 5-10 years based on the individual's age and health status
- may provide health education or preventive counseling services designed to reduce risk factors identified in the visit
- will include a health risk assessment to
  - establish or update the person's medical and family history
  - create a list of current providers, suppliers and prescriptions
  - take measurements of height, weight, blood pressure and other routine measurements
  - detect cognitive impairments

## **Eliminating Cost-sharing For Most Preventive Services**

Starting in January 2011, Medicare consumers will be able to obtain most preventive services at no cost to them (that is, they will not have to meet a deductible or pay co-pays). As a result, consumers will have no cost for these services:

- annual mammograms for those age 40 and older
- cervical cancer screening, including a Pap test and pelvic exam
- prostate cancer screening (for most codes)
- colorectal cancer screenings
- diabetes screening
- cholesterol and other cardiovascular screenings
- medical nutrition therapy to help manage diabetes or kidney disease
- annual flu shots, the pneumonia vaccine, and the Hepatitis B vaccine
- bone mass measurement
- abdominal aortic aneurysm screening to check for bulging blood vessel
- HIV screening for those who request it or who are at increased risk

For all services listed, current Medicare coverage policies continue to apply.

### **Medicare Now Covers Smoking Cessation Counseling Services**

Medicare began to cover smoking cessation counseling services as of August 25, 2010. The services may be provided on an inpatient and an outpatient basis but are covered by Medicare Part B. The consumer has the Medicare Part B co-pays for all smoking cessation counseling services received in 2010. Beginning on January 1, 2011, consumers will be able to receive these services at no cost.