



Eastern Shore
Rural Health
System
INCORPORATED

Quality Family Healthcare



Staff "models" are Dixie Greer (Franktown) and Dr. Jeanne Roll (Atlantic).

Medicare Wellness Visits Q&A

What preventive medical visits does Medicare cover?

Medicare pays for two kinds of wellness visits: a one-time Welcome to Medicare preventive visit and an Annual Wellness Visit.

An official government booklet called *Your Guide to Medicare's Preventive Services* explains all of the services offered. It is available online at: <http://www.medicare.gov/Pubs/pdf/10110.pdf>.

What is the "Welcome to Medicare" preventive visit? Why should I get it?

This visit puts you in control of your health and your Medicare benefits from the start. Offered during the first year that you are enrolled in Medicare, this comprehensive visit is an easy way for you and your care team to get an accurate status of your health now and information to check your baseline health status against in the future.

What's covered in my Welcome to Medicare preventive visit?

You, the health educator and your provider will:

- Review your medical and family history
- Assess current health conditions and prescriptions
- Conduct tests and screenings to determine a starting point for future, personalized care

You can also discuss steps to prevent disease, improve your health and stay well. Following this visit you will get a personalized prevention plan outlining the screenings and services you should get.

A health educator helps you improve your overall health and well-being. A health care provider is a doctor, nurse practitioner or physician's assistant.

What should I know about the Annual Wellness Visit?

If you've had Medicare Part B for longer than 12 months, you can get this yearly wellness visit to develop or update a personalized prevention plan based on your current health and risk factors. The visit includes the following:

- Review of medical and family history
- List of current providers and prescriptions
- Height, weight, blood pressure, and other routine measurements
- A screening schedule for appropriate preventive services
- A list of risk factors and treatment options for you

What should I bring to my Welcome to Medicare preventive visit or Annual Wellness Visit?

- Your medical and immunization records (if you're seeing a new provider – call your former provider to get copies of these)
- Your family health history – to help determine if you're at risk for certain diseases
- Your prescription and over-the-counter medications that you currently take

What is the difference between the Welcome to Medicare preventive visit and the Annual Wellness Visit?

The main difference is the timing. If you are newly enrolled in Medicare, you are eligible for the one-time Welcome to Medicare visit only within the first year. You are eligible for the Annual Wellness Visit if you have been enrolled in Medicare for more than 12 months. You are eligible for additional Annual Wellness visits every 12 months after your Welcome visit or first Annual Wellness Visit.

How are Medicare wellness visits different from a yearly physical?

Medicare wellness visits include a detailed discussion of your risks and the screenings.

My provider knows my health history. Why should I get a preventive visit?

Medicare preventive visits provide more opportunity than typical visits to assess your health and discuss your personal preventive plan. This visit focuses on preventive services, health education, and how your Medicare benefits can be used to achieve your healthcare goals.

How much does the Welcome to Medicare preventive visit or the Annual Wellness Visit cost?

These visits are free for most people with Medicare.

Will I have out-of-pocket costs for preventive tests such as mammograms or colonoscopies?

Medicare determines which preventive – or screening – tests are covered and when they should take place, and no copay or deductible is required for these.

A screening test is given to those who have no symptoms of a condition, such as measuring cholesterol levels in people who have no symptoms of cardiovascular disease. A diagnostic test is used to confirm a suspected condition once initial testing has revealed its possibility. Sometimes a screening test becomes diagnostic if potential abnormalities are found and more testing must be performed.

It's a good idea to become familiar with Medicare's rules about screening tests. Your Guide to Medicare's Preventive Services explains in detail which are covered and how often. The guide is available here: <http://www.medicare.gov/Pubs/pdf/10110.pdf>

Can anyone help me understand Part D and any other benefits that compliment Medicare?

We can help you understand your benefits and walk you through the enrollment process for other benefits that work in coordination with Medicare. We can also help those without Internet access to information. Call 757-442-4819 x1157 or email mneville@esrh.org for help.

Call your center to schedule your Medicare wellness visit and create a personalized prevention plan!

Atlantic Community Health Center

757-824-5676

Bayview Community Health Center

757-331-1086

Chincoteague Island Community Health Center

757-336-3682

Franktown Community Health Center

757-442-4819

Onley Community Health Center

757-787-7374

