

## **MAKING MEDICARE MAKE SENSE**

### **Answers To Some of The Most Commonly Asked Medicare Questions**

#### **Q: What Preventive Benefits Are Available Through Medicare?**

**A:** For more than 40 years, Medicare has been there for older and disabled Americans when they get sick. But many serious illnesses and diseases can be prevented, or treated early before complications develop, with the use of Medicare's Preventive Services. Medicare has expanded its list of preventive benefits and now covers or helps pay for a variety of preventive exams, tests, screenings and services that can help you stay healthier longer.

For example, since January 1, 2005, the "Welcome to Medicare" preventive physical exam is available to everyone within the first six months that they have enrolled in Medicare Part B. It's a great way to get up-to-date on your screenings and shots, and talk with your doctor about staying healthy.

Medicare now covers cardiovascular screenings, to check your cholesterol and blood fat levels. Also newly added to the list of covered services is diabetes screening. In both cases, there is no cost to people in the Original Medicare Plan.

There are many other Preventive Services available to people with Medicare. All women age 40 and over can get a screening mammogram every 12 months. A Pap test and pelvic exam for cervical and vaginal cancer screening are also covered for all women every 24 months.

Colorectal cancer screening is covered every 12 to 48 months depending on the type of procedure involved, and whether you are at high risk. And all men are covered for prostate cancer screening every 12 months, after the age of 50.

Medicare's Preventive Services also extend to testing for glaucoma (every 12 months), and osteoporosis (every 24 months) for those at risk. In some cases, testing can occur more often, if medically necessary.

And, of course, Medicare covers an annual flu shot for all beneficiaries, and a lifetime pneumococcal shot, without charge. Even Hepatitis B shots are covered if your doctor says you need them.

By taking charge of your health, you can make the most of the benefits Medicare provides. More important, by taking advantage of these preventive services, you can help yourself stay healthy, and help your doctor treat any illness or disease sooner – when treatment is most effective.

Medicare's preventive services are covered no matter what kind of Medicare health plan a person has. However, the amount one pays out of pocket for these services varies depending on the type of health plan – some services may be subject to a co-pay like 20% of the total costs, co-insurance or a deductible, such as the \$100 Part B deductible. Beneficiaries should call their plan for more information. People with Medicare can also visit [My.Medicare.gov](http://My.Medicare.gov) to keep track of the preventive benefits they've used and the services they need, or learn more about Medicare's Preventive Services by visiting [www.medicare.gov](http://www.medicare.gov) on the web, or calling 1-800-MEDICARE (1-800-633-4227).