

Achieving Your Best Health: The Annual Medicare “Wellness” Visit

If you’ve had Medicare Part B for longer than 12 months, you are eligible for a yearly “Wellness” visit. This preventive visit is a great chance for you and your physician to begin a partnership for your good health. Together you will develop or update a personalized prevention plan based on your current health and risk factors.

The “Wellness” visit includes a review of your medical history, education and counseling about preventive services, certain screening tests, shots and referrals for other care (if needed). The visit is a perfect opportunity to get up to date on crucial screening tests and shots. It also offers an important chance to talk with your doctor about your family’s medical history.

Please review the Q&A below. If you have additional questions after reviewing this information, please do not hesitate to get in touch with us. We look forward to partnering with you in achieving your best health.

What happens during the “Wellness” visit?

During the Medicare “Wellness” visit, your doctor will:

- review your medical and family medical history
- develop or update a list of your current medical care providers
- develop or update a list of your current prescriptions and medications
- check your height, weight and blood pressure
- perform other routine measurements
- screen for cognitive impairment and depression
- develop or update a screening schedule for appropriate preventive services
- develop or update a list of risk factors and treatment options for you
- provide personalized health preventive counseling (for example, weight loss, smoking cessation, fall prevention and nutrition)

What does not happen during the “Wellness” visit?

- This visit will not cover or treat any established chronic conditions such as diabetes or high blood pressure.
- The “Wellness” visit is not the time to adjust medications.
- It is not a thorough, complete physical examination. Your provider may examine you, but it will be based solely on your risk factors.

How often is the visit covered, what are the prerequisites, and how much does it cost?

The “Wellness” visit is covered every 12 months. You pay nothing for this visit if your doctor accepts Medicare. You don’t need to have had a “Welcome to Medicare” preventive visit before having a yearly “Wellness” visit if you’ve already had Medicare Part B for at least 12 months. Please note: If you do have the “Welcome to Medicare” preventive visit during your first year, you’ll have to wait 12 months before you can have your first annual “Wellness” visit.

What if I’ve had Medicare for less than 12 months? Can I still get a “Wellness” visit?

If you’ve had Medicare for less than a year, you’ll want to participate in the “Welcome to Medicare” preventive visit.

What are my costs if I have a Medicare Replacement Plan?

While most Medicare Replacement Plans follow Medicare guidelines, it is your responsibility to verify your benefits with your insurance company.

Special considerations to avoid misunderstandings – *when a preventive visit is combined with additional problems:*

Common misunderstandings can occur in regard to billing when additional problems are addressed at the same time as a Medicare “Wellness” exam.

For a major new medical problem (for example, migraines or abdominal pain), it is best to treat the immediate concerns, so you'll likely want to reschedule your preventive visit. If you have a minor concern (for example, a flare-up of previously treated allergies), there may be time to manage those symptoms that day. Such additional concerns are not considered part of a Medicare "Wellness" exam, however, please be aware of the following:

- Other symptoms will be treated only as time allows.
- There will be separate charges for extra services not covered during a Medicare "Wellness" exam; these charges include co-pays and deductibles.
- There may be an extra charge if extra blood tests are done to evaluate a symptom, if X-rays or treatments are ordered, if medications are changed or started, or if referrals to specialists are done for symptoms.
- If you do not want any extra charges for the Medicare "Wellness" exam, then you may want to schedule an additional visit for the extra concerns.
- If you and your physician do address your extra concerns, there will be charges similar to those you would see for a separate visit, including coinsurance and deductibles. You can think of it as combining two visits on one day
- your Medicare "Wellness" exam and your symptoms visit.

Should you have any additional questions after reviewing this information, please do not hesitate to ask. Thank you again for allowing us the opportunity to partner with you in achieving your best health.

Pricing information is available if desired.