



HEALTHCARE COOPERATIVE

PREVENTIVE CARE WELLNESS VISIT FACT SHEET

We encourage members to receive an annual or routine preventive visit with a primary care physician (also known as a PCP) which qualifies as no-cost-share preventive care. PCPs could be a family practitioner, a physician or nurse practitioner specializing in general or internal medicine, a pediatrician or an ob/gyn. A relationship with a PCP is highly valuable because your PCP can help you navigate the health care system and coordinate care if you ever need it.

Annual wellness visits may include the following and remain under the “no cost share” umbrella:

- Checks related to blood pressure, weight, cholesterol and blood glucose
- Certain immunizations like flu, tetanus, diphtheria, hepatitis A and B, herpes zoster (shingles), HPV, measles, meningococcal, mumps, pertussis, pneumococcal, rubella, chickenpox and others based on age and gender
- Women’s health: Breast exam, pap smear and cervical exam
- Children’s health: Age appropriate screenings and tests

How to Avoid Surprise Charges During Your Annual Wellness Exam

It is not uncommon for surprise charges to result from annual wellness visits for our members. Some tips we have learned from working with our members:

- When you schedule your appointment for no-cost-share preventive care with your in-network doctor, make it clear that you want to be informed before any services are provided that do not meet the definition of no-cost-share preventive care.
- On the day of your visit, remind your doctor and/or the nurse that you are there for a preventive care visit and you would like to be informed if any of the tests or screenings fall outside of the Affordable Care Act’s definition of no-cost-share preventive care.
- Be aware that if you discuss any specific health concerns with your doctor that require additional tests, neither the visit nor the tests may be billed as preventive. Even if you scheduled it as a preventive visit, discussing a specific health concern might require your doctor to investigate the cause and the visit might then be billed by the doctor as “diagnostic” instead of preventive.
- If your doctor orders a full blood panel, some of the tests included in the panel may be covered at 100% while others are not. While standard blood glucose and cholesterol tests are no-cost-share preventive care, metabolic panel and blood count (CBC) tests do not qualify as no-cost-share preventive care.
- Be careful about getting other tests or services during your visit that you didn’t plan on. If your doctor recommends a test, ask question about how you will be charged. If you are unsure, we suggest waiting to have the test until you can contact us and understand your benefits. However, you should discuss the value of getting the test with your doctor while you are there, so you can make an informed decision once you better understand the cost.