



CENTERS FOR MEDICARE & MEDICAID SERVICES

Staying Healthy

Medicare's preventive services

An easy and important way to stay healthy is to get disease prevention and early detection services. They can help keep you from getting certain diseases or help you find health problems early, when treatment works best. Talk with your doctor or health care provider to find out what tests or other services you may need, and how often you should get them to stay healthy. If you have Medicare Part B, you get many preventive services at no cost to you.

Did you know Medicare covers these preventive services?

Abdominal Aortic Aneurysm Screenings

A one-time screening ultrasound for people at risk. If you have a family history of abdominal aortic aneurysms, or you're a man 65–75 and have smoked at least 100 cigarettes in your lifetime, you're considered at risk.

Alcohol Misuse Screenings and Counseling

Medicare covers one alcohol misuse screening per year for adults (including pregnant women) to identify those who misuse alcohol, but aren't alcohol dependent. If you screen positive, you can get up to 4 brief face-to-face counseling sessions per year (if you're competent and alert during counseling). Your primary care doctor or other primary care provider must provide the counseling in a primary care setting (like a doctor's office).

Bone Mass Measurements

These tests help to see if you're at risk for broken bones. Medicare covers these tests once every 24 months (more often if medically necessary) for certain people at risk for osteoporosis.

Did you know that Medicare covers these Preventive Services? (continued)

Cardiovascular Disease (Behavioral Therapy)

Medicare will cover one visit per year with your primary care doctor to help lower your risk for cardiovascular disease. During this visit, your doctor may discuss aspirin use (if appropriate), check your blood pressure, and give you tips to make sure you're eating well.

Cardiovascular Disease Screenings

Ask your doctor to test your cholesterol, lipid, and triglyceride levels to help determine if you're at risk for a heart attack or stroke. If you're at risk, there are steps you can take to prevent these conditions. Medicare covers tests for cholesterol, lipid, and triglyceride levels every 5 years.

Colorectal Cancer Screenings

These tests help find colorectal cancer early, when treatment works best. If you're 50 or older, or are at high risk for colorectal cancer, Medicare covers one or more of these tests: fecal occult blood test, blood-based biomarker test, flexible sigmoidoscopy, screening colonoscopy, barium enema, and multi-target stool DNA test (like Cologuard™). How often Medicare pays for these tests depends on the test and your level of risk for this cancer. You and your doctor decide which test is best for you.

Depression Screenings

Medicare covers one depression screening per year for all people with Medicare. The screening must be done in a primary care setting (like a doctor's office) that can provide follow-up treatment and referrals, if needed.

Diabetes Screenings

Medicare covers tests once per year to check for diabetes or pre-diabetes. These tests are available if you have any of these risk factors: high blood pressure, history of abnormal cholesterol and triglyceride levels (dyslipidemia), obesity, or a history of high blood sugar. Tests are also covered if you have 2 or more of these: 65 or older, overweight, family history of diabetes (parents, brothers, sisters), a history of gestational diabetes (diabetes during pregnancy), or you delivered a baby weighing more than 9 pounds. Based on the results of these tests, you may be eligible for up to 2 screenings each year. Talk to your doctor for more information.

Diabetes Self-Management Training

This training helps teach you to cope with and manage your diabetes. This training may include tips for eating healthy, being active, monitoring blood sugar, taking medication, and reducing risks. Medicare covers this training for people who have diabetes and a written order from their doctor or other health care provider.

Flu Shots

These shots help prevent influenza or flu virus. Medicare covers these shots once per flu season.

Glaucoma Tests

These tests help check for eye disease glaucoma. Medicare covers these tests once every 12 months for people at high risk for glaucoma.

Hepatitis B Shots

This series of shots helps protect people from getting Hepatitis B. Medicare covers these shots for people at medium or high risk for Hepatitis B.

Hepatitis B Virus (HBV) infection screenings

Medicare covers HBV infection screenings for people at high risk for HBV infection or pregnant women. Medicare will only cover these screenings if a primary care provider orders them. Medicare covers HBV infection screenings yearly for those with continued high risk who don't get a Hepatitis B vaccination. Medicare also covers these screenings for pregnant women at the first prenatal visit for each pregnancy, at the time of delivery for those with new or continued risk factors, and at the first prenatal visit for future pregnancies, even if previously given the Hepatitis B shot or had negative HBV screening results.

Hepatitis C Screening Tests

Medicare covers a one-time Hepatitis C screening test for people born between 1945 and 1965. Medicare also covers repeat screenings once per year for certain people at high risk who continue to engage in high risk behavior. People who are at high risk meet at least one of these conditions: current or past history of illicit injection drug use, or have had a blood transfusion before 1992.

Did you know that Medicare covers these Preventive Services? (continued)

HIV Screenings

Medicare covers HIV (Human Immunodeficiency Virus) screenings if you ask and, you're either 15-65 and not at risk, or you're younger than 15 or older than 65 and are at increased risk. Medicare covers this test once every 12 months or up to 3 times during a pregnancy.

Lung Cancer Screenings

Medicare covers lung cancer screening with Low Dose Computed Tomography once per year if you meet all of these conditions: You're 55–77, don't have signs or symptoms of lung cancer (asymptomatic), are a current smoker or have quit smoking within the last 15 years, have a tobacco smoking history of at least 30 “pack years” (an average of one pack (20 cigarettes) per day for 30 years), and you have a written order from your doctor. Before your first lung cancer screening, you'll need to schedule an appointment with your doctor to discuss the benefits and risks of lung cancer screening. You and your doctor can decide whether lung cancer screening is right for you.

Mammograms (Breast Cancer Screenings)

Medicare covers mammograms once every 12 months for women 40 and older. Medicare also covers one baseline mammogram for women between 35–39.

Medical Nutrition Therapy Services

Medicare may cover medical nutrition therapy and certain related services if you have diabetes or kidney disease, or you have had a kidney transplant in the last 36 months, and your doctor or other qualified provider refers you for the service.

Medicare Diabetes Prevention Program

If you have Medicare Part B, have pre-diabetes, and meet other criteria, Medicare covers a once-per-lifetime proven health behavior change program to help you prevent type 2 diabetes. The program begins with at least 16 core sessions offered in a group setting over 6 months. After the core sessions, you may be eligible for additional monthly sessions to help you maintain healthy habits.

Obesity Screenings and Behavioral Counseling

If you have a body mass index (BMI) of 30 or more, Medicare covers behavioral therapy sessions to help you lose weight. Medicare may cover this counseling if you get it in a primary care setting (like a doctor's office), where it can be coordinated with your other care and a personalized prevention plan.

Pap Test and Pelvic Exam (including breast exams)

These lab tests and exams check for cervical and vaginal cancers. Medicare covers these tests and exams every 24 months for all women and once every 12 months for women at high risk. Medicare also covers Human Papillomavirus (HPV) tests (when given with a Pap test) once every 5 years if you're 30–65 without HPV symptoms.

Pneumococcal Shots

Medicare covers a pneumococcal shot to help prevent pneumococcal infections (like certain types of pneumonia). Medicare also covers a different second shot if it's given one year (or later) after the first shot. Talk with your doctor or other health care provider to see if these shots are right for you.

Preventive Visits

One-time “Welcome to Medicare” preventive visit—Medicare covers a review of your health and education, and counseling about preventive services, including any screenings, shots, and referrals for other care you may need. Medicare covers this visit in the first 12 months of your Medicare Part B (Medical Insurance) coverage.

Yearly “Wellness” visit—If you've had Part B for longer than 12 months, you're eligible for a yearly wellness visit to develop or update a personalized prevention plan based on your current health and risk factors. Medicare covers this visit once every 12 months.

Prostate Cancer Screenings

These tests check for prostate cancer. Medicare covers a digital rectal exam and a Prostate Specific Antigen (PSA) lab test once every 12 months for men over 50 (starting the day after your 50th birthday).

Did you know that Medicare covers these Preventive Services? (continued)

Sexually Transmitted Infections Screenings and Counseling

Medicare covers sexually transmitted infection screenings for chlamydia, gonorrhea, syphilis, and Hepatitis B. Medicare covers these screenings for pregnant women and for certain people who are at increased risk for a sexually transmitted infection when a primary care doctor or other primary care provider orders the tests. Medicare covers these tests once every 12 months or at certain times during pregnancy. Medicare also covers up to 2 individual, 20 to 30 minute, face-to-face, high-intensity behavioral counseling sessions each year for sexually active adults at increased risk for sexually transmitted infections. Medicare will only cover these counseling sessions if they're provided by a primary care provider and take place in a primary care setting (like a doctor's office). Medicare won't cover counseling given in an inpatient setting, like a skilled nursing facility, as a preventive benefit.

Tobacco use Cessation Counseling

Medicare covers up to 8 face-to-face visits in a 12-month period for all people who use tobacco. A doctor or other health care provider must give this counseling.



What you'll pay

You'll pay nothing for many preventive services if you get them from a qualified doctor or other health care provider who accepts assignment. Some Medicare health plans may not charge deductibles, copayments, or coinsurance for certain in-network, Medicare-covered preventive services. Contact your plan or benefits administrator directly to learn more about the costs. For more information about Medicare health plans, visit [Medicare.gov/sign-up-change-plans/different-types-of-medicare-health-plans](https://www.Medicare.gov/sign-up-change-plans/different-types-of-medicare-health-plans).

For more information

For more details about Medicare's coverage of these preventive services, including your costs in Original Medicare, visit [Medicare.gov/publications](https://www.Medicare.gov/publications) to view or print the booklet "Your Guide to Medicare's Preventive Services." Or, call 1-800-MEDICARE (1-800-633-4227) and ask for a copy. TTY users can call 1-877-486-2048.

You can also log into (or create) your secure Medicare account at [Medicare.gov](https://www.Medicare.gov) where you can see a list of preventive services you're eligible to get in Original Medicare. You can also get other personal Medicare information, view your Medicare claims, print a copy of your official Medicare card, pay your Medicare premiums if you get a bill from Medicare, and more.

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit [Medicare.gov/about-us/nondiscrimination/accessibility-nondiscrimination.html](https://www.medicare.gov/about-us/nondiscrimination/accessibility-nondiscrimination.html), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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