“Welcome to Medicare” Preventive Visit

Medicare will cover a one-time preventive visit during the first 12 months that you are enrolled in Part B. The “Welcome to Medicare” preventive visit is an opportunity for a complete assessment of your health and provides a baseline for future, personalized care with your doctor. This exam is a preventative physical exam and not a “routine physical checkup.”

How much does the exam cost?

This visit is free if your doctor accepts assignment. * If you are enrolled in a Medicare Advantage plan you may have to pay a copayment. Medicare will cover the exam if performed by a physician, physician assistant, nurse practitioner, or clinical nurse specialist. You must indicate to your provider that you want the “Welcome to Medicare Exam” when you schedule your appointment, not a complete physical or you may be responsible for the entire amount.

This exam does not include clinical Laboratory tests. If your doctor performs additional tests or services during this visit, you may have to pay a coinsurance and the Part B deductible will apply.

What should I expect during the exam?

During the “Welcome to Medicare” preventive visit your doctor will:

- Review your medical and social history
- Check your height, weight, and blood pressure
- Calculate your body mass index (BMI)
- Give you a simple vision test
- Review risk factors for depression and safety
- Offer to talk to you about creating advance directives, (legal documents that record your wishes about medical treatment if you are not able to make decisions about your care)
- Educate and counsel you to help you stay well

Following the visit, your doctor will provide you with a written plan explaining which screenings, shots and other preventive services you need.

Medicare will also cover a one-time screening EKG if you get a referral from the “Welcome to Medicare” preventive visit. You pay 20% of the Medicare approved amount after you meet the Part B deductible.

[*Provider accepts Medicare-approved amount as full payment.]
Annual “Wellness” Visit

If you’ve had Medicare Part B for longer than 12 months you can get a yearly “Wellness” visit to develop or update a personalized prevention plan based on your current health and risk factors. This visit will include a review of your medical and family history, check your height, weight, blood pressure, and other routine measurements, screen for appropriate preventive services and provide a list of risk factors and treatment options for you.

How often is it covered?
Medicare will pay for one “Wellness” visit every 12 months. If you got a “Welcome to Medicare” preventive visit in your first year, you will have to wait 12 months before you can get your first yearly “Wellness” visit. You don’t need to have had a “Welcome to Medicare” visit before getting a yearly “Wellness” visit.

How much does the exam cost?
You pay nothing for this visit if your doctor accepts assignment.* If you get additional tests or services during this visit that aren’t covered as part of the “Wellness” visit, you may have out-of-pocket costs. It is very important when you make the appointment that you schedule an “annual wellness visit”, not a complete physical or you may be responsible for the entire amount.

What should I take to the exam?
You should bring the following when you go to your “Welcome to Medicare” preventive visit or “Wellness” visits:
- Medical records, including immunization records (if you are seeing a doctor for the first time)
- Family health history
- A list of current prescription drugs, how often you take them, and why.

For more information about preventive benefits covered by Medicare, call SHIIP to request your copy of Medicare Preventive Benefits fact sheet.

SHIIP is a resource for objective information and assistance on Medicare and related health insurance issues. For assistance please call 1-800-351-4664 (TTY 1-800-735-2942) for the SHIIP services in your area, or check the SHIIP website: shiip.iowa.gov

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