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"Welcome to Medicare" Preventive Visit

Medicare Part B (Medical Insurance) covers a "Welcome to Medicare" preventive visit once within the first 12 months you have Part B.

Your costs in Original Medicare

You pay nothing for the "Welcome to Medicare" preventive visit if your doctor or other qualified health care provider accepts assignment. The Part B deductible doesn't apply.

However, you may have to pay coinsurance, and the Part B deductible may apply if:

- Your doctor or other health care provider performs additional tests or services during the same visit.
- These additional tests or services aren't covered under the preventive benefits.

Note: Your doctor or other health care provider may recommend you get services more often than Medicare covers. Or, they may recommend services that Medicare doesn't cover. If this happens, you may have to pay some or all of the costs. Ask questions so you understand why your doctor is recommending certain services and whether Medicare will pay for them.

What it is

This visit includes a review of your medical and social history related to your health and education and counseling about preventive services, including these:

- Certain screenings, flu and pneumococcal shots, and referrals for other care, if needed.
- Height, weight, and blood pressure measurements.

- A calculation of your body mass index.
- A simple vision test.
- A review of your potential risk for depression and your level of safety.
- An offer to talk with you about creating advance directives.
- A written plan letting you know which screenings, shots, and other preventive services you need. [Get details about coverage for screenings, shots, and other preventive services.](#)

Things to know

When you make your appointment, let your doctor's office know you would like to schedule your "Welcome to Medicare" preventive visit.

Bring the following to your visit:

- Medical records, including immunization records.
- Family health history.
- A list of any prescription drugs, over-the-counter drugs, vitamins, and supplements that you currently take, how often you take them, and why.

Note: If you have a current prescription for opioids, your provider will review your potential risk factors for opioid use disorder, evaluate your severity of pain and current treatment plan, provide information on non-opioid treatment options, and may refer you to a specialist, if appropriate. Your provider will also review your potential risk factors for substance use disorder, like **alcohol and tobacco use**, and refer you for treatment if needed.

Related resources

- [What you need to know when you're new to Medicare](#)
- [Medicare & You: women's health \(video\)](#)
- [Yearly "Wellness" visits](#)

Article Source

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