



Understanding Preventive Care

Remember the old saying that “an ounce of prevention is worth a pound of cure?” This can be especially true when it comes to preventive care services.

Maintaining or improving your health with regular preventive care, along with following the advice of your doctor, can help you stay healthy. Routine checkups and screenings can help you avoid serious health problems, allowing you and your doctor to work as a team to manage your overall health, and help you reach your personal health and wellness goals.

What is Preventive Care?

Preventive care focuses on evaluating your current health status when you are symptom free. Preventive care allows you to obtain early diagnosis and treatment, to help avoid more serious health problems. Even if you're in the best shape of your life, a serious condition with no signs or symptoms may put your health at risk. Through a preventive exam and routine health screenings, your doctor can determine your current health status and detect early warning signs of more serious problems.

Your preventive care services may include immunizations, physical exams, lab work and x-rays. During your preventive visit your doctor will determine what tests or health screenings are right for you based on many factors such as your age, gender, overall health status, personal health history and your current health condition.



Preventive services can include many types of exams, subject to age and gender guidelines, including:

Physician office services:

- Routine physical examinations
- Well baby and well child care
- Immunizations

Lab, X-ray or health screening tests:

- Screening mammography
- Screening colonoscopy or sigmoidoscopy
- Cervical cancer screening
- Prostate cancer screening
- Osteoporosis screening



Examples of: Diagnostic Services

A patient had a polyp found and removed during a prior preventive screening colonoscopy. Based on the new recommendations for more frequent screening after finding and removing the polyp, all future colonoscopies are considered diagnostic.

A patient had an elevated cholesterol on a prior preventive screening test, and is now under treatment. Further testing is considered diagnostic rather than preventive.

What is NOT Preventive Care?

Medical treatment for specific health conditions, on-going care, lab or other tests necessary to manage or treat a medical issue or health condition are considered diagnostic care or treatment, not preventive care.

How does UnitedHealthcare determine the difference between preventive care and diagnostic services?

Certain services can be done for preventive or diagnostic reasons. When a service is performed specifically for preventive screening, and there are no known symptoms, illnesses, or history, the services will be considered **Preventive Care**, subject to age and gender guidelines, the health status of the person, and the person's benefit plan.

Services are considered Preventive Care when a person:

- ▶ does not have symptoms or any abnormal studies indicating an abnormality.
- ▶ or has had a screening done within the recommended age and gender guidelines with the results being considered normal.
- ▶ or has had a diagnostic service with normal results, after which the physician recommends future preventive care screenings using the appropriate age and gender guidelines.
- ▶ or has a preventive service done that results in a diagnostic service being done at the same time and as an integral part of the preventive service (e.g. polyp removal during a preventive colonoscopy), subject to benefit plan provisions.

Services are considered **Diagnostic Care**² when:

- ▶ abnormal results on a previous preventive or diagnostic screening test requires further diagnostic testing or services.
- ▶ abnormal test results found on a previous preventive or diagnostic service requires the same test be repeated sooner than the normal age and gender guideline recommendations would require.
- ▶ services are ordered due to current symptom(s) that require further diagnosis.

² A diagnostic service is not covered as preventive care, but may be covered under the applicable non-preventive medical benefit, subject to your Benefit Plan provisions.

Frequently asked questions

Is there a list of specific preventive health services?

The Patient Protection and Affordable Care Act (PPACA) requires plans to cover preventive care services without cost sharing based on the following guidelines:

- ▶ Preventive service “A” and “B” recommendations of the U.S. Preventive Services Task Force (USPSTF).
- ▶ Immunizations recommended by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices (ACIP) and recommendations by the Health Resources and Services Administration (HRSA).
- ▶ Pediatric services based on recommendations by the American Academy of Pediatrics Bright Future pediatric schedule, and newborn metabolic screenings.
- ▶ Preventive care and screening for women as provided in the comprehensive guidelines supported by the HRSA.

The list of current preventive care recommendations and guidelines can be found at www.uhcpreventivecare.com.

How are preventive care services covered?

Certain preventive services are covered without charging a deductible, copayment or coinsurance when these services are provided by a network provider, based on your age, gender, health status and Benefit Plan. The types of preventive services covered can vary based on your age, gender and health status. There may be services you had in the past that will now be covered as preventive, at no additional cost to you. And, there may be services you received in the past that were considered preventive, that may no longer be covered as preventive under the new guidelines. The preventive services included in this provision are included in your benefit plan.

Are mammograms covered, and would family history dictate whether they would be considered preventive?

UnitedHealthcare generally covers screening mammograms for adult women without any history or symptoms, as preventive care. If a woman were having mammograms, due to a health issue, those would be considered diagnostic rather than preventive.

Are preventive care services limited to one visit per calendar year, or can the physician recommend more frequent preventive care services?

UnitedHealthcare will apply limits consistent with the recommendations and guidelines of the USPSTF or other organizations. These limits are set based on age, health status, gender guidelines, and medical evidence.

Does UnitedHealthcare consider medication a preventive care service?

UnitedHealthcare will provide coverage for the physician evaluation, medication management and counseling services as described in your benefit plan, but over-the-counter drugs and prescribed medications are not covered under preventive care. Please consult your Pharmacy Plan documents (if applicable) for specific information on your available coverage for prescribed medication.

What if my doctor writes a prescription during a preventive care visit?

The fact that a physician writes a prescription does not affect whether the visit, or services during the visit, are preventive. The actual prescriptions and medications, regardless of the purpose of the medication, are not covered as a preventive care service.

Are there lifetime dollar limits on preventive care services?

Preventive care services are generally covered without cost sharing and are not subject to lifetime dollar limits for in-network providers, under current health guidelines based on your benefit plan.



Medications are not covered under preventive care services as part of your medical plan coverage, such as:

- Aspirin to prevent cardiovascular disease in men and women
- Folic acid supplementation for women who may become pregnant
- Iron supplementation for children at risk for anemia
- Nicotine replacement products

The medications above are available at your pharmacy without a prescription.

Please consult your Pharmacy Plan documents (if applicable) for specific information on your available coverage for prescribed medication.

Preventive or not?

When you visit your doctor, the services you receive will be considered either preventive or non-preventive. See if you can determine in the following scenarios whether the care received would be considered preventive or non-preventive.

Situation 1

A woman visits her network doctor for her annual mammogram.

Answer: This is considered preventive care because her visit is part of a routine annual exam and has not been prompted by any sort of previous diagnosis.

Situation 2

A member visits her primary doctor and has a skin cancer screening as part of her preventive exam.

Answer: This is considered preventive care because her visit is part of a routine annual exam and has not been prompted by any sort of previous diagnosis.

Situation 3

A member makes an appointment with a dermatologist to obtain a skin cancer screening.

Answer: The visit to the dermatologist is not considered preventive care. The woman would be responsible for any deductible, coinsurance, or copayment applicable based on her Benefit Plan provisions.

Situation 4

A woman who takes medicine for high cholesterol has an annual wellness exam and receives a blood test to measure her cholesterol level.

Answer: Although the woman is taking cholesterol medicine, the office visit and the blood test are considered preventive care because they are part of her overall wellness exam.

Situation 5

A woman makes quarterly visits to the doctor for blood tests to check her cholesterol level and to confirm the medication dosage level is appropriate.

Answer: The quarterly blood tests are considered non-preventive because they are treatment for an existing condition.

Situation 6

A woman has an annual wellness exam and receives blood tests to screen for iron, kidney or liver function, in addition to a urinalysis.

Answer: If the physician orders lab work during a preventive care visit some of the tests may be covered as preventive care, such as a cholesterol screening. However, other blood chemistry panels like iron, kidney or liver function and urinalysis, would not be covered as preventive care. These are not considered services covered without cost, under the preventive care guidelines. The woman would be responsible for any deductible, coinsurance, or copayment that may be applicable based on her Benefit Plan provisions.

Talk to your doctor

Consult your doctor for your specific preventive health recommendations, as he or she is your most important source of information about your health. These services in this flyer do not necessarily reflect the services, vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the back of your ID card.

For more information about preventive care services that might be right for you visit www.uhpreventivecare.com.

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100-10649 7/11 © 2011 United HealthCare Services, Inc.