

Preventive and Yearly Wellness Exams

Medicare Part B (Medical Insurance) covers Welcome to Medicare preventive visit

You can get this introductory visit only within the first 12 months you have Part B. 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, 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.

This visit is covered one time. You don't need to have this visit to be covered for yearly "Wellness" visits.

Yearly Wellness visits



If you have had Part B for longer than 12 months, you can get this visit to develop or update a personalized prevention help plan.

This plan is designed to help prevent disease and disability based on your current health and risk factors. Your provider will ask you to fill out a questionnaire, called a Health Risk Assessment, as part of this visit. Answering these questions can

help you and your provider develop a personalized prevention plan to help you stay healthy and get the most out of your visit.

It can also include:

- A review of your medical and family history
- Developing or updating a list of current providers and prescriptions
- Height, weight, blood pressure, and other routine measurements
- Detection of any cognitive impairment
- Personalized health advice
- A list of risk factors and treatment options for you
- A screening schedule (like a checklist) for appropriate preventive services. Get details about coverage for screenings, shots, and other preventive services.
- Advance care planning

This visit is covered once every 12 months (11 full months must have passed since the last visit).

Who's eligible? All people with Part B are covered. You pay nothing for the Welcome to Medicare preventive visit or the yearly Wellness visit if your doctor or other qualified health care provider accepts assignment. The Part B deductible does not apply. However, you may have to pay co-insurance, 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. It is important to ask questions if your doctor recommends additional services to make sure Medicare will pay for them.




The Helping Hand

Oregon Senior Health Insurance Benefits Assistance
Oregon Senior Medicare Patrol



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Brought to you by:
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New Medicare cards are coming

By Miranda Mathae, SHIBA Field Officer

Medicare is mailing new Medicare cards between April 2018 and April 2019. Your new card will have a new Medicare number that's unique to you, instead of your Social Security number. Your new Medicare card will be sent automatically by mail to the address on file with Social Security. If you have moved recently, make sure your mailing address is up to date. To change your address, you can:

- Visit your online my Social Security account at ssa.gov/myaccount
- Call Social Security at 1-800-772-1213 (toll-free). TTY users can call 1-800-325-0778
- Contact your local Social Security office

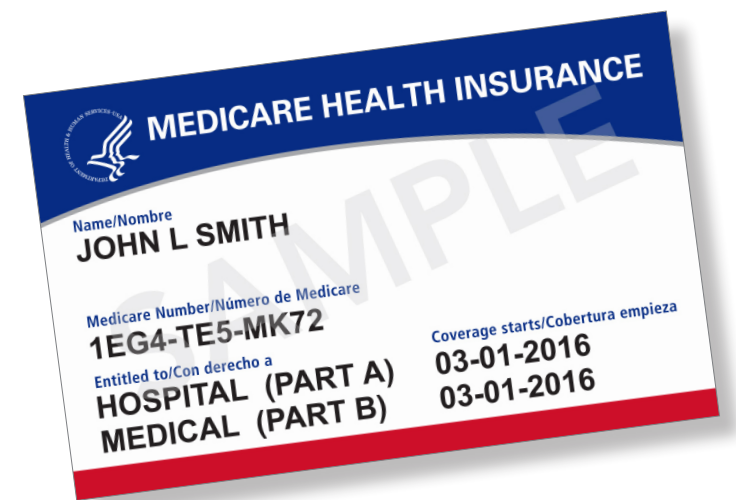
The new Medicare cards will not include Social Security numbers to prevent identity theft. You do not need to do anything to receive your new card.

Some fraudsters may try to take advantage of this change. Remember: Medicare will not call

and ask for your personal information. Any callers asking for your current Medicare number or Social Security number are criminals trying to steal your identity. If they call you, hang up immediately.

When you receive your new Medicare card, destroy your previous card.

If you have questions, call 800-722-4134 (toll-free) to reach your local SHIBA office.



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Get FREE help with Medicare

The Senior Health Insurance Benefits Assistance (SHIBA) program is a federally funded state program that offers free, objective, and local one-on-one health insurance counseling and assistance to people with Medicare and their families. Certified counselors help people make informed decisions about their health insurance.

Free help is available to people ready to sign up for Medicare, people already on Medicare, caregivers and advocates.

SHIBA counselors:

- Provide information about Medicare, including what health and prescription drug plans are available to you.
- Help with Medicare appeals and complaints.
- Educate how to protect, detect, and report Medicare fraud, waste, and abuse.

Do you have a family member or friend who is ready to sign up for Medicare? Do you know someone who is a caregiver to someone who is eligible for Medicare? Let them know help is available at shiba.oregon.gov or 800-722-4134.

You can stay connected with SHIBA by visiting our website. You can get detailed information about Medicare programs and counseling opportunities, and to schedule group presentations.

SHIBA is built on a network of certified counselor volunteers across Oregon.

To learn more about SHIBA, our free services, or rewarding volunteer opportunities, call us at 800-722-4134 (toll-free).



Free online Medicare class

We look forward to offering this informative webinar to Oregonians.

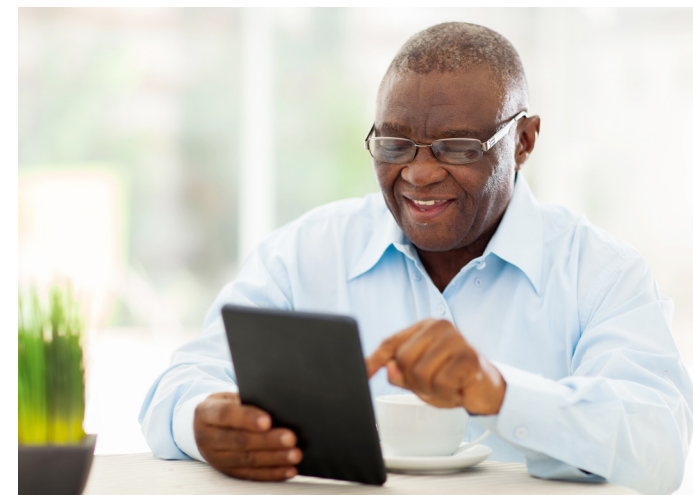
Oregon SHIBA is offering a free Medicare 101 webinar class on Saturday May 16 from 10 a.m. to 12 noon.

You can register for the webinar by going to shiba.oregon.gov and selecting “Find a free class near you” under “Medicare help”.

You can also call 800-722-4134 (do not put in your ZIP code).

The webinar will include information on:

- Medicare Part A
- Medicare Part B



- Medicare Supplement policies
- Medicare Advantage Plans
- Financial Assistance Programs
- Medicare Part D
- Medicare Resources



Medicare preventive service: Tobacco use cessation

Smoking tobacco can cause many health problems, including heart disease, respiratory diseases, and lung cancer — the leading cause of cancer death in the U.S. Close to 40 million people in the U.S. smoke tobacco, but quitting can help prevent these health problems. You can quit smoking today, and Medicare wants to help.

While you are making plans and goals for the new year, make a note to talk with your doctor

about quitting if you use tobacco. Medicare covers eight face-to-face smoking cessation counseling sessions during a 12-month period. If you haven't been diagnosed with an illness caused or complicated by tobacco use, you pay nothing for these counseling sessions, as long as you get them from a qualified doctor or another Medicare provider.

Every year, more people die from cancer associated with tobacco use more than any other cancer. Don't become a statistic. Medicare benefits can help you quit.

Saving on prescription costs

If you have limited income and resources, you may qualify for Medicare's Extra Help program. You might be able to get help paying your Medicare drug plan's monthly premiums, yearly deductibles, and prescription co-payments. Drug costs in 2018 for most people who qualify will be no more than \$3.35 for each generic drug and \$8.35 for each brand-name drug.

Even if you are not sure you qualify, fill out an application. Many people with Medicare may be eligible for Extra Help but don't know it. You or a family member could be one of them.

It's easy and free to apply for Extra Help. Here's how:

- Apply online at www.benefitscheckup.org/oregon/
- Call Social Security at 1-800-772-1213. TTY users can call 1-800-325-0778.

- Apply at your local Social Security office.
- Contact your local SHIBA (Senior Health Insurance Benefits Assistance) office by calling 800-722-4134.

Don't wait. Apply today to see if you qualify for some Extra Help with your Medicare prescription drug costs.

EXTRA HELP

