# DIAGNOSTIC VERSUS PREVENTIVE CARE

HOW CAN I PAY TWO DIFFERENT AMOUNTS FOR THE SAME PROCEDURE?

## YOUR BENEFIT PAYMENT DEPENDS ON HOW YOUR DOCTOR CODES YOUR PROCEDURE

Preventive care, or routine care, is typically covered at 100 percent. Diagnostic tests or screenings performed for treating or diagnosing a medical condition are covered according to your specific insurance plan.

### WHAT'S THE DIFFERENCE?

The difference is the reason for the exam.

- When you see a doctor for preventive care, that's the purpose of your visit. Your doctor checks your overall health using standard tests appropriate for your age and gender.
- When you receive diagnostic care, the doctor performs procedures to find out what's wrong and to treat your condition, based on your symptoms.

### WHAT PREVENTIVE CARE COVERAGE DO I HAVE?

The Preventive Schedule is a list of general care guidelines. We encourage you to review this before you or a family member visits your medical provider. Only those procedures that are listed on the Preventive Schedule are covered at 100 percent with no deductible during a preventive exam.

The tests on this schedule can be performed for either preventive or diagnostic reasons. If you are seeing your doctor for a preventive exam and not for an existing medical condition, the services should be covered at 100 percent.

If your doctor orders other tests, those tests may be subject to your deductible and/or coinsurance, or they may be denied in certain instances. If you have a medical condition and the tests are being done to monitor the condition, then the services would be performed for diagnostic reasons and your deductible and coinsurance apply.

### SAMPLE OF PREVENTIVE BENEFITS\*

SAMELE OF THE PENETTS				
Benefits for Adults	When submitted by your doctor as routine	When submitted by your doctor as diagnostic		
Routine physical exams	100%	Covered according to your specific plan insurance		
Routine gynecological exams, including a PAP test	100%	Covered according to your specific plan insurance		
Mammograms, as required*	100%	Covered according to your specific plan insurance		
Colorectal cancer Screening*	100%	Covered according to your specific plan insurance		

\* See the Preventive Schedule for specific procedures and risk factors.

If you or your doctor have questions about the administration of the care as listed on the Preventive Schedule, please call Member Service at the number listed on your ID card.



### SEE THE FOLLOWING EXAMPLES IN THE NEXT COLUMN

John, Janice and Judy have procedures performed by their network physicians. All three have the same PPO plan. However, they pay different amounts for their care because John is receiving preventive care, Janice is receiving diagnostic care and Judy is receiving both.

#### TO ACCESS THE PREVENTIVE SCHEDULE ON OUR WEBSITE

Go to MoreforMembersWPA.com.

#### YOU SHOULD AT LEAST HAVE THE FOLLOWING PREVENTIVE CARE

If you are a 40-year-old female:

Routine physical exam

Pap test

- Mammogram
- Pelvic exam

If you are a 50-year-old female:

**D** Routine physical exam

Colorectal cancer screening

Pap test

Mammogram

If you are a 50-year-old male:

Routine physical exam

Colorectal cancer screening

	JOHN	JANICE	JUDY
r ostic CARE	<b>REASON FOR EXAM:</b> John turned 40 and figured he should have an annual exam to check his health.	<b>REASON FOR EXAM:</b> Janice is a diabetic and is recovering from a near heart attack. The doctor put her on a strict diet and exercise regime and wants to perform follow-up tests to measure her improvement.	REASON FOR EXAM: Judy needs to follow up with her doctor to see if her cholesterol- reducing medication is working. While there, she figures she should take care of her routine physical and get a flu shot since flu season is coming.
	PROCEDURES PERFORMED: • Physical Exam • Blood Pressure • Cholesterol (Lipid Panel) • Fasting Blood Glucose • Urinalysis	PROCEDURES PERFORMED: • Physical Exam • Blood Pressure • Cholesterol (Lipid Panel) • Fasting Blood Glucose • Urinalysis	PROCEDURES PERFORMED: • Cholesterol (Lipid Panel) • Physical Exam • Flu Shot • Urinalysis
	DOCTOR CODES AND SUBMITS AS: Routine	DOCTOR CODES AND SUBMITS AS: Diagnostic	DOCTOR CODES AND SUBMITS AS: Some procedures as diagnostic, some as routine.
	BENEFIT PAYMENT: The office visit is covered at 100%. The urinalysis would be denied since routine tests not listed on the Preventive Schedule are not covered. The remaining procedures are covered at 100%.	BENEFIT PAYMENT: In this scenario the urinalysis would be covered at her standard benefit level because it is performed as diagnostic, not routine. The remaining procedures and office visit are covered according to her specific insurance plan.	BENEFIT PAYMENT: The routine office visit and flu shot are covered at 100%. The urinalysis would be denied since it is being performed as routine and is not on the Preventive Schedule. The lipid panel would be covered according to her insurance plan because it is diagnostic.

