



## PREVENTIVE VS DIAGNOSTIC CARE

**Under the Affordable Care Act, insurance plans now cover preventative care without patient cost sharing, i.e., without co-pays, co-insurance, or deductibles. However, services that are not classified as preventative care are still subject to cost sharing**

**Preventive care** refers to services that can help you stay healthy and identify problems early. These services are called preventive because they “prevent” serious health problems.

When you have no symptoms, no reason to think you aren’t healthy, and you get a service or test listed in the “preventive service.”

Example: A member goes to the doctor and they remind her that she has reached the recommended age for annual mammogram this is considered preventive.

**Diagnostic services** start when you already have signs of a health problem; therefore, your doctor may order tests to further diagnose your condition

If you have a chronic condition your doctor runs certain tests to monitor your condition, these are not considered preventive and will be subject to your deductible

Example: a member goes to the doctor for a lump in her breast, the doctor orders a mammogram to further diagnose the lump. In this case the mammogram would be considered diagnostic

I have read and understand the difference between preventive and diagnostic care

Name \_\_\_\_\_

Sign \_\_\_\_\_ Date \_\_\_\_\_