

Annual Wellness Visit

The Annual Wellness Visit (AWV) is a yearly appointment with your primary care provider (PCP) to create or update a personalized prevention plan. This plan may help prevent illness based on your current health and risk factors. Keep in mind that the AWV is not a head-to-toe physical. Also, this service is similar to but separate from the one-time [Welcome to Medicare preventive visit](#).

Eligibility

Medicare Part B covers the Annual Wellness Visit if:

- You have had Part B for over 12 months
- And, you have not received an AWV in the past 12 months

Additionally, you cannot receive your AWV within the same year as your Welcome to Medicare preventive visit.

Covered services

During your first Annual Wellness Visit, your PCP will develop your personalized prevention plan. Your PCP may also:

- Check your height, weight, blood pressure, and other routine measurements
- Give you a health risk assessment
 - This may include a questionnaire that you complete before or during the visit. The questionnaire asks about your health status, injury risks, behavioral risks, and urgent health needs.
- Review your functional ability and level of safety
 - This includes screening for hearing impairments and your risk of falling.
 - Your doctor must also assess your ability to perform activities of daily living (such as bathing and dressing), and your level of safety at home.

- Learn about your medical and family history
- Make a list of your current providers, durable medical equipment (DME) suppliers, and medications
 - Medications include prescription medications, as well as vitamins and supplements you may take
- Create a written 5-10 year screening schedule or check-list
 - Your PCP should keep in mind your health status, screening history, and eligibility for age-appropriate, Medicare-covered preventive services
- Screen for cognitive impairment, including diseases such as Alzheimer's and other forms of dementia
 - Medicare does not require that doctors use a test to screen you. Instead, doctors are asked to rely on their observations and/or on reports by you and others.
- Screen for depression
- Provide health advice and referrals to health education and/or preventive counseling services aimed at reducing identified risk factors and promoting wellness
 - Health education and preventive counseling may relate to weight loss, physical activity, smoking cessation, fall prevention, nutrition, and more.

AWVs after your first visit may be different. At subsequent AWVs, your doctor should:

- Check your weight and blood pressure
- Update the health risk assessment you completed
- Update your medical and family history
- Update your list of current medical providers and suppliers
- Update your written screening schedule
- Screen for cognitive issues
- Provide health advice and referrals to health education and/or preventive counseling services

Costs

If you qualify, Original Medicare covers the Annual Wellness Visit at 100% of the Medicare-approved amount when you receive the service from a [participating provider](#). This means you pay nothing (no deductible or coinsurance). Medicare Advantage Plans are required to cover AWVs [without applying deductibles, copayments, or coinsurance](#) when you see an in-network provider and meet Medicare's eligibility requirements for the service.

During the course of your AWV, your provider may discover and need to investigate or treat a new or existing problem. This additional care is considered diagnostic, meaning your provider is treating you because of certain symptoms or risk factors. Medicare may bill you for any diagnostic care you receive during a preventive visit.