

Knowing the difference between “preventive” and “diagnostic” may help you understand when cost sharing may apply !

What’s the difference between preventive and diagnostic care?

‘Preventive’ and ‘diagnostic’ are descriptions of the types of health care you may receive. There are times when you may receive both services during the same visit. Typically a preventive service is provided at no cost, whereas you may be charged a copay for a diagnostic service.

Preventive services are defined as:

The act of preventing an illness or condition from happening.

Some examples of preventive services includes routine check-ups, screening tests, and immunizations for when you have no symptoms and you don’t have a diagnosis of a condition or a disease. These are shown by the “apple” in your plan description or in the Medicare booklet. (PAP tests, PSA, colorectal, mammograms, are some examples)

Diagnostic Services are defined as:

A response to a complaint identified by you or your doctor.

Routinely monitoring a condition or illness that you have such as hypertension or diabetes is an example. Diagnostic services include tests or procedures ordered by a physician needed to help diagnose or monitor your condition or disease. Diagnostic tools can include: radiology, ultrasound, nuclear medicine, laboratory, pathology and other tests.

“Preventive” and “diagnostic” services may occur during the same visit.

If your visit starts out as preventive but the doctor identifies a condition and enters the claim with a diagnosis of a condition, then it may be subject to a diagnostic service copay. For example, during a routine check-up your doctor discusses a chronic illness you may have. The tests your doctor orders may be preventive (such as a screening mammogram) and other tests may be diagnostic (such as a cholesterol check for someone with high cholesterol).

Knowing if your test is preventive or diagnostic

It's also important to know that the same type of test can be preventive or diagnostic. It depends on whether it's done as part of a regular wellness visit or if it's in response to new symptoms or existing conditions. For example:

Service	Preventive	Diagnostic
Cholesterol Screening	Done as part of an annual preventive care visit. The test is done on the basis of your age or family history. You have not been diagnosed with high cholesterol	You have high cholesterol and your doctor is checking your numbers or is checking to see that the "statin" you are on is helping.
Mammogram	You have a visit for a routine mammogram or screening	Your doctor orders a mammogram to learn more about a lump that was found
Colonoscopy	You have no symptoms and go in for a routine colonoscopy	You are having symptoms and your doctor orders a colonoscopy.
Blood Test	You have high blood pressure – a risk factor for diabetes – so your doctor does a routine diabetes blood check. The blood test is being used to see if you need any further tests.	Your doctor orders a blood test because you have symptoms that may be caused by diabetes. The blood test is now being used as a tool to make the correct diagnosis as symptoms may mean different things.

(This is meant to serve as just a guide for cost share charges please check with your contracts and your insurance)