

What You Need to Know About Adult Well Visits



Well visits may be a key part of preventive care. They can reassure you that you are as healthy as you feel, or prompt you to ask questions about your health. Learn more about adult well visits and when they are covered at peba.sc.gov/well-visits.

How the benefit works

State Health Plan primary members are eligible for one well visit each year at no member cost. Evidence-supported services, based on United States Preventive Services Task Force (USPSTF) A and B recommendations, are included as part of an adult well visit under the State Health Plan. After talking with your doctor during a visit, the doctor can decide which services you need and build a personal care plan for you.

Who is eligible?

The benefit is available to all non-Medicare primary adults ages 19 and older who are covered by the Standard Plan or Savings Plan. Adult members can take advantage of this benefit at a network provider specializing in general practice, family practice, pediatrics, internal medicine, gerontology, and obstetrics and gynecology.

Eligible female members may use their well visit at their gynecologist or their primary care physician, but not both. If a woman visits both doctors in the same year, only the first routine office visit received will be covered. Women ages 18-65 can also receive a Pap test each calendar year at no member cost through PEBA Perks.

How to get the most out of your benefits

The State Health Plan offers many value-based benefits at no member cost to its primary members through PEBA Perks. Learn how to coordinate your PEBA Perks benefits with your adult well visit below.

Step 1

Get your preventive screening. You can receive a biometric screening at no cost, which will minimize cost to the Plan at your adult well visit.

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Step 2

Have your adult well visit after your preventive screening. USPSTF A and B recommendations are included as part of an adult well visit. After talking with your doctor during a visit, the doctor can decide which services you need and build a personal care plan for you.

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Step 3

Share your preventive screening results with your doctor. You will receive a confidential report with your screening results, and we recommend you share it with your doctor to eliminate the need for retesting at a well visit. Sharing your results will minimize the cost of your adult well visit to the Plan.

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Step 4

Follow your doctor's recommendations and stay engaged with your health. We encourage you to take advantage of the other PEBA Perks available to you. If you're eligible, sign up for No-Pay Copay to receive certain generic drugs at no cost to you.



Invest in your health

Through PEBA Perks, you can take advantage of a preventive screening worth more than \$300 at no cost to you. The screening includes blood work, a health risk appraisal, height and weight measurements, a blood pressure check and lipid panels.

Your worksite may host a screening, or you can attend a regional screening to avoid sitting in a waiting room for lab work at your doctor's office. The preventive screening benefit is more comprehensive than lab work that is part of the [USPSTF A and B recommendations](#). This means you will receive a more complete look at your overall health by sharing your preventive screening results with your doctor at your well visit. Identifying health issues early can really save you money.

Who is eligible?

This benefit is available to State Health Plan primary members, including employees, retirees, COBRA subscribers and their covered spouses, as well as former spouses.

Services not included as part of an adult well visit

Services not included as part of an adult well visit are those without an A or B recommendation by the USPSTF. Learn more at www.USPreventiveServicesTaskForce.org. Other services, including a complete blood count (CBC), EKG, PSA test and basic metabolic panel, if ordered by your physician to treat a specific condition, may still be covered. These services are subject to copayments, deductibles and coinsurance, as well as normal Plan provisions. Follow-up visits and services as a result of your well visit are also subject to normal Plan provisions.