



**“Zero” Copayments for Preventive Services – Aetna Medicare OpenSM Plan
A Medicare private fee-for-service plan (PFFS)**

<u>Benefits Category</u>	<u>“Zero” Copayments for Aetna Medicare Open Plan (PFFS)</u>
<p>Routine Physicals 99381-99397, 99401-99404, G0344 and (99201-99205, 99211-99215 are considered preventive if billed with V03.0-V03.9, V04.0-V04.89, V05.0-V05.9, V06.0-V06.9, V20.0-V20.2, V70.0, V70.3, V70.5, V72.3, V72.31)</p>	<p>\$0 copay, limited to one exam per year</p>
<p>Bone Mass Measurement 76977, 77078, 77079, 77080, 77081, 77083, 78350,78351 and G0310 must be billed with one of the following preventive diagnosis codes V70.0, V70.3, V70.5, V72.0, V72.3, V72.31 and V82.81</p>	<p>\$0 copay for each Medicare-covered bone mass measurement</p>
<p>Colorectal Screening G0104, G0105, G0106, G0120, G0121, G0122, G0394, S0605 and (45378-45386, 45300-45320, 45330-45334, 45338-45340, 74270, 74280, 82270 are considered preventive if billed with V70.0, V70.3, V70.5, V76.41, V76.50, V76.51)</p>	<p>\$0 copay for each Medicare-covered colorectal screening exam</p>
<p>Prostate Cancer Screening G0102 and G0103 and (84152-84154 are considered preventive if billed with V70.0, V70.3, V70.5, V76.44, V84.03)</p>	<p>\$0 copay for each Medicare-covered prostate cancer screening exam</p>
<p>Hepatitis B Vaccine 90740, 90746, 90747 and G0010</p>	<p>\$0 copay for the hepatitis B vaccine</p>
<p>Flu Immunization 90655-90658 and G0008 90661-90663</p>	<p>\$0 copay for the flu vaccine</p>
<p>Pneumonia Immunization</p>	<p>\$0 copay for the pneumonia vaccine</p>

90732, 90669, G0009 and S0195	
Screening Mammograms G0202, 77052 and 77057	\$0 copay for each Medicare-covered screening mammogram
Pap Smear -- Preventive G0101, G0123-G0124, G0141-G0148, S0613 and (P3000, P3001, Q0091, S0610, S0612, 88141-88155, 88164-88167, 88174-88175 are considered preventive if billed with V70.0, V70.3, V70.5, V72.3, V72.31, V72.6, V76.2, V76.46, V76.47, V84.02, V84.04)	\$0 copay for the Pap smear
Pelvic Exams G0101	\$0 copay for each pelvic exam, up to one pelvic exam each year
Routine Hearing Exams V5008 and (92551-92561, 92587 are considered preventive if billed with V03.0-V03.9, V04.0-V04.89, V05.0-V05.9, V06.0-V06.9, V20.0-V20.2, V70.0, V70.3, V70.5, V72.1, V72.3, V72.31)	\$0 copay for each routine hearing test, up to one test every year
Routine Vision Exams S0620, S0621 and (92002 – 92015 are considered preventive if billed with V03.0-V03.9, V04.0-V04.89, V05.0-V05.9, V06.0-V06.9, V20.0-V20.2, V70.0, V70.3, V70.5, V72.0, V72.3, V72.31, 367.0-367.4, 367.9)	\$0 copay for each routine eye exam, limited to one exam every year

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