



**Florida
Health Care
Plans**



An Independent Licensee of the Blue Cross and Blue Shield Association

FHCP Coverage of Colonoscopies for Medicare Members

Your costs for these tests

Screening Colonoscopy: You pay nothing.

However, **IT IS IMPORTANT THAT YOU UNDERSTAND** that if a screening colonoscopy is performed, and during the procedure, your doctor has to take a biopsy or remove a lesion, polyp or other growth, the procedure is at that point considered to be diagnostic, and you will have an out of pocket expense as explained below for the diagnostic colonoscopy. Since there is no way to know in advance if your screening colonoscopy will end up being a diagnostic colonoscopy, you should always be prepared to pay your diagnostic colonoscopy copay to the provider or facility. You should discuss collection policies with your provider before you schedule your procedure.

Diagnostic Colonoscopy: You pay

- a \$50.00 copay per visit for a diagnostic colonoscopy at a FHCP in-network GI lab or other non-hospital location; or
- a \$100.00 copay per visit for a diagnostic colonoscopy at an in-network ambulatory surgical center; or
- a \$150.00 copay per visit for a diagnostic colonoscopy at an in-network hospital facility, as an outpatient.

What factors increase risk for colorectal cancer?

You should discuss screening colonoscopy versus diagnostic colonoscopy testing options and timeframes with your doctor to determine which test is right for you, and how often you need to be examined.

Risk for colorectal cancer increases if...

- ✓ You have had colorectal cancer before, even if it has been completely removed
- ✓ You have a close relative, such as a sister or brother, parent or child who had colorectal polyps or colorectal cancer
- ✓ You have a history of polyps
- ✓ You have inflammatory bowel disease (like ulcerative colitis or Crohn's disease).