# Consumer Assistance Program Preventative vs Diagnostic Colonoscopies



#### Does insurance cover colorectal cancer screenings?

Both private insurers and Medicare cover the costs of colorectal cancer screening tests without costsharing for adults age 45-75. This means that in most cases patients are not responsible for insurance copayments, co-insurance, or deductibles. Screening tests can include stool-based tests, colonoscopy, and flexible sigmoidscopy. Sometimes, despite federal and state laws that prohibit cost-sharing, patients who have a colonoscopy receive a bill they shouldn't.

#### <u>When can I be charged for a</u> <u>colonoscopy?</u>

- You have a diagnostic colonoscopy. A diagnostic colonoscopy is performed if you are symptomatic (blood in the stool, abdominal pain, trouble or pain going to the bathroom) and your doctor recommends a colonoscopy to figure out what is wrong,
- You don't have a Coloradoregulated plan and you are considered high risk - you have family or personal history of colon cancer, a previously found polyp, or a history of gastrointestinal problems. You'll know you have a Colorado-regulated plan if you see see "CO-DOI" on your insurance card.
- You're on Original Medicare

## **What are my protections?**

Federal law states that patients cannot be charged for a colonoscopy that is part of their routine health care. Specifically, cost sharing is not allowed for the procedure or for any services that are part of the procedure including:

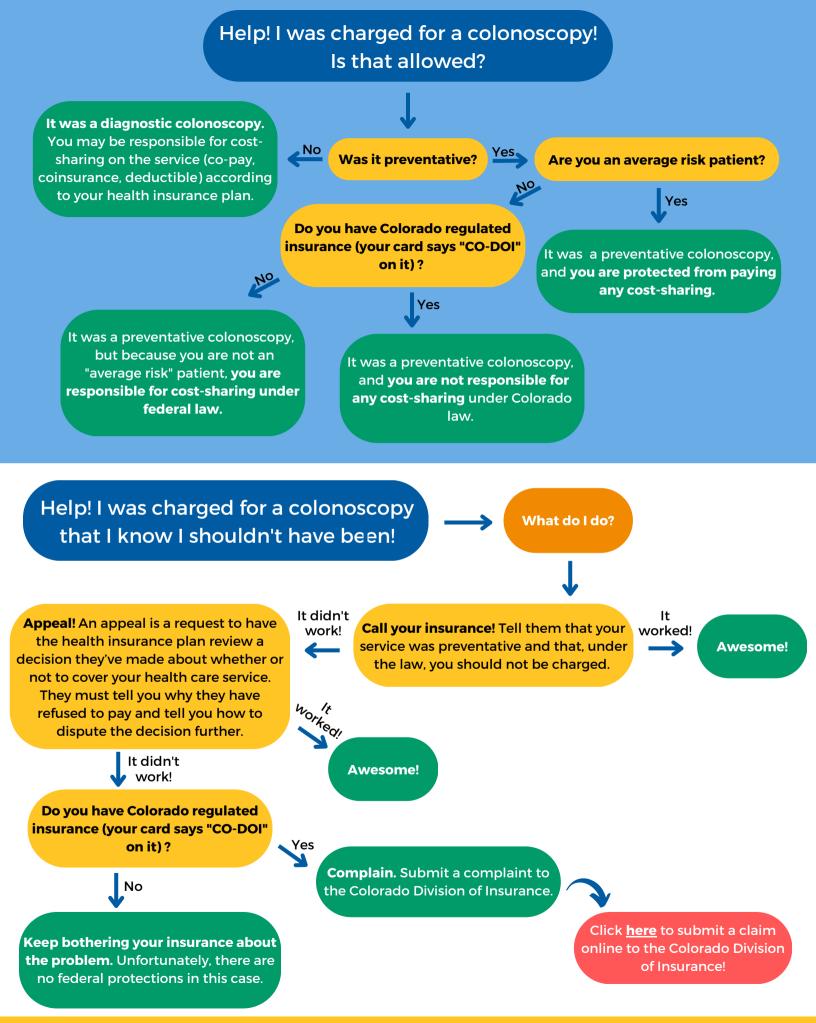
- Required specialist consultation before the screening procedure,
- Bowel preparation medications prescribed for the screening procedure,
- Anesthesia services performed in connection with a preventive colonoscopy,
- Polyp removal performed during the screening procedure, and
- Any pathology exam on a polyp biopsy performed as part of the screening procedure.

Cost-sharing is also not allowed if a follow-up colonoscopy is needed after a positive non-invasive stool-based test or direct visualization test (sigmoidoscopy or CT colonography).

Colorado law is more expansive. Regularly scheduled colonoscopies are free to all patients, even if the patient has a higher risk of colon cancer. As with Federal law, specialist consultation, bowel preparation medications, anesthesia services, polyp removal and testing, and follow-up colonoscopies are covered with no out-of-pocket costs.

### <u>Important Note!</u>

Federal law only applies to patients with an "average risk" for colon cancer. If a patient has a family or personal history of colon cancer, a previously found polyp, or a history of gastrointestinal disease (like Crohn's), they are considered "high risk" and cost-sharing can be required.



Need more help? Reach out! help@cohealthinitiative.org or call 303-839-1261