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Many Using Free Preventive Screenings Tied to Health Care Reform

Medicare heads say offering the tests free will save money long term, but critics disagree

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MONDAY, June 20 (HealthDay News) -- More than 5 million Americans with Medicare have already taken advantage of the preventive benefits added by the passage of health care reform, U.S. health officials said Monday.

In addition, Medicare has launched a new program to increase awareness of these new benefits to all Medicare recipients.

"The most effective way, and the most cost-effective way of keeping people healthy is by preventing illness before it occurs. We are making it easier for people in Medicare to get preventive care," Kathleen Sebelius, secretary of the U.S. Department of Health and Human Services, said during a morning press conference.

The agency believes that any spending on prevention will more than pay for itself long term.

But not everyone agrees that the initiative will be a cost-saver, and some argue that spending millions on preventive services will simply add to the national debt -- without reducing the overall cost for health care.

According to a new Medicare report, over 5.5 million people who have traditional Medicare have already used the new preventive benefits, which include mammograms, bone density tests and screenings for prostate cancer.

These and other preventative services are now available for free to Medicare recipients, with no co-payments or deductibles. In addition, Medicare patients are eligible for an annual "[wellness visit](#)" at no charge.

As part of the wellness visit, doctors will review the patient's health and recommend a "personalized wellness plan." So far, more than 780,000 Medicare recipients have had such visits, according to the report.

Medicare is pushing these preventive care options to help cut the overall cost of health care, Sebelius said.

According to the agency, 70 percent of Medicare patients have at least one chronic [health condition](#) and 38 percent have two to four chronic conditions. Providing more preventative care will not just improve patients' health and save lives, but could save about two-thirds of the \$2 trillion spent treating preventable chronic illness, the agency said.

"Seventy-five percent of our [health care costs](#) are for the treatment of chronic illnesses," Dr. Donald Berwick, administrator of the U.S. Centers for Medicare and [Medicaid](#) Services, said during the press conference. "Many of them can be prevented and more of them can have a more favorable outcome," he said.

"We need a fundamental shift in how we think about health care. We need to move toward investing in healthy behaviors," Berwick added.

"Having to pay for preventive screening keeps people from getting them," Berwick said. "We are making it possible for anyone to have these preventive services."

But not everyone agrees that the initiative will save money.

Michael Cannon, director of health policy studies at the libertarian Cato Institute in Washington, D.C., said the preventive-care subsidies now offered by what he called "Obama-care" are "not free. They are costing taxpayers dearly by adding to America's \$14 trillion national debt."

Supporters of the policy claim that more preventive care will reduce health care spending, "but medical research shows that it will not," he said. "If the \$250 checks that Obama-care sent to millions of Medicare enrollees didn't make the law popular among seniors, I doubt these preventive-care subsidies will," Cannon added.

Another critic is Devon Herrick, a senior fellow at the National Center for Policy Analysis, a Dallas-based think tank that argues for free market solutions to issues surrounding health care.

He said that "on the one hand preventive services are good because you will extend lives and save lives. But people often make the mistake thinking that 'if we just do more of this we will save a lot of money of future care.' It doesn't really work that way."

More information

For more information on preventive care, visit [HealthCare.gov](#).

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