

Get Screened: Take charge of your health. Take charge of your life.

These tests relate to heart disease, stroke, diabetes, cancer and injuries. Act on information from these tests to keep healthy now and later. If you have questions about these tests, talk with your health care provider.

To identify risk	Get this service and talk about its results with your provider	How often*	Covered by AlaskaCare – retired employees
Tobacco use	Provider recommendations for quitting	Every health care visit	No specific coverage. Alaska's Tobacco Quit Line is always no charge — 1-800-QUIT-NOW.
Unhealthy weight	Height and weight measurement	At least yearly	No specific coverage.
High blood pressure	Measurement	Every 2 years, or yearly if blood pressure is 120/80 or higher	No specific coverage.
Slips and falls	Risk review	Yearly, start at age 65	No specific coverage.
Diabetes	Fasting blood test (blood sugar) or A1c	Every 3 years, start at age 45	Not covered unless you have specific related symptoms.
High cholesterol (fats in your blood)	Fasting blood test (lipid panel)	Every 5 years, men start at age 35, women start at age 45	Not covered unless you have specific related symptoms.
Heart attack or stroke	Risk assessment — Should you take aspirin?	Every 5 years, men ages 45-79, women ages 55-79	No annual exam or preventive visit mentioned.
Breast cancer	Mammogram	Women every 2 years, ages 50-74	<ul style="list-style-type: none"> • One baseline mammogram between ages 35 and 40 • One mammogram every two years between ages 40 and 50 or if you have a personal or family history of breast cancer, and • An annual mammogram at age 50.
Cervical cancer	Pap smear	Women every 3 years, starting at age 21	One Pap smear per year for all women ages 18 and older.
Colorectal cancer	EITHER Colonoscopy	Every 10 years, ages 50-75	Not covered unless you have specific related symptoms.
	OR Fecal Occult Blood Test (FOBT) and Sigmoidoscopy (Sig)	FOBT yearly, ages 50-75 Sig every 5 years, ages 50-75	

*Get tested more often if you have risk factors ([see below and turn page over for more information](#)).

Disease-specific risk factors:

- **Diabetes:** Being Alaska Native/American Indian, African American/Black, Asian, Pacific Islander, or Hispanic/Latino; or, if a woman, having gestational diabetes during pregnancy or having a baby who weighed more than 9 pounds at birth.
- **Cardiovascular diseases** (heart attack, angina or stroke): Drinking more than a moderate amount of alcohol (for example, more than 2 drinks daily for men or more than 1 drink daily for women); or having diabetes.
- **Falls:** Risk factors that can be changed include: lower body weakness; poor vision; problems with gait, balance, shoes and/or feet; home hazards; use of psychoactive medications; and postural dizziness (head rush). As the number of risk factors goes up, so does the chance of a fall.
- **Cancer:** Having or had Hepatitis C.

If you have questions about AlaskaCare payment for a specific medical bill or want to find a network provider in your area, visit www.AlaskaCare.gov or call Aetna's health concierge at 1-855-784-8646.



Chronic diseases share risk factors. If you maintain or adopt healthier behaviors, you reap multiple benefits.

You are more likely to develop...	By...					
	Being overweight	Using tobacco	Exercising fewer than 3 times weekly	Having a relative with the disease	Having high blood pressure or high cholesterol	Eating foods that are...
Diabetes	X	X	X	X	X	
Heart attack, chest pain or stroke	X	X	X	X	X	high in salt
Cancer	X	X	X	(some cancers)		high in fats and/or high in white flour and sugars

In-Network versus Out-of-Network Providers

For retirees, the cost difference between selecting in- or out-of-network providers depends on the provider. There is a set amount that will be paid for care, and **in**-network providers have agreed to accept that amount (plus the 20% co-insurance) as their entire fee. **Out**-of-network providers may charge patients for the entire difference between the in-network provider payment and their fee, even if it exceeds the 20% co-insurance amount. Make sure you know how much you will need to pay before you receive care!

Health insurance term	Definition	For calendar year 2014
Premium	A payment you make to an insurer for your coverage	Varies
Deductible	An amount you need to pay before the insurance plan starts paying for care	\$150 (individual) \$450 (family)
Co-insurance	A percentage of the cost of a service that you pay	20%
Co-pay	A fixed cost you pay each time you receive care	n/a
Out of pocket limit	The most you pay during a policy period (usually one year) before your health insurance or plan starts to pay 100% for covered essential health benefits.	\$800 <ul style="list-style-type: none"> • Payments toward this limit start accumulating after you have met your deductible. • Only 20% co-insurance payments count toward this limit.

Through Aetna, retirees have the same preferred provider network as active employees.

AlaskaCare retiree plan and Medicare

If you are eligible for Medicare, the AlaskaCare retiree plan becomes your secondary coverage. This means that it will not pay for care from a provider who is not participating in Medicare. However, if the AlaskaCare retiree plan covers a service which is not covered by Medicare, AlaskaCare will follow its deductible and co-insurance rules to help pay for it.

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