

Colonoscopy and Insurance Coverage FAQs rev. Aug 2016

What do I need to know about my health insurance?

Your insurance policy is an agreement between you and your insurance company. You should research your policy and benefits prior to any procedures to prevent surprises. If you have questions about your insurance benefits, please contact your insurance company directly.

What is a screening colonoscopy?

A screening colonoscopy is “a service performed on an asymptomatic person for the purpose of testing for the presence of colorectal cancer or colorectal polyps.” This means you have no symptoms and no abnormal findings prior to the colonoscopy procedure.

When should I have a screening colonoscopy?

Screening colonoscopies are recommended as routine testing for people aged 50 and older who have a normal risk for colorectal cancer. In this scenario, a screening colonoscopy is likely paid under the wellness benefit by your insurance company.

What if my insurance does not cover a screening colonoscopy?

If you do not have a preventive wellness screening benefit and/or you are not 50 years of age or older, your insurance benefit will not cover this test and you will be responsible for the charges on the account.

What happens if the procedure starts as a screening colonoscopy but a polyp is found during the procedure?

If a polyp is found and either biopsied or removed during the procedure, it becomes a diagnostic procedure and you will be responsible for your deductible. If you have questions about your specific insurance benefits, please contact your insurance company directly.

How often should I be screened with a colonoscopy?

In the average-risk patient, they recommend screening every 10 years.

Are there exceptions for people under the age of 50 to receive a screening or follow-up colonoscopy?

For patients younger than 50-years-old and are considered high risk due to family history (colorectal cancer or adenomas before age 60), it is recommended that a patient get a screening every five years, beginning at age 40 or 10 years before the age of the affected relative (parent/sibling/child).

What is a polyp surveillance colonoscopy?

A polyp surveillance colonoscopy is a test performed on patients with a history of adenomatous polyps. For patients 18 years and older and with a history of prior colonic polyp(s) in previous colonoscopy findings, a surveillance or follow up colonoscopy is generally performed every three to six years. The number and frequency of follow-ups is based on your personal situation.





What is a diagnostic colonoscopy?

A diagnostic colonoscopy is performed on patients to investigate symptoms and to confirm or rule out a suspected diagnosis. This service is not always covered under a wellness benefit and you may have out-of-pocket costs for this procedure.

What signs or symptoms require a diagnostic colonoscopy?

Diarrhea, abdominal pain, rectal bleeding, and constipation are some of the symptoms that may constitute a diagnostic colonoscopy. If any of these symptoms are a result of the prep for the colonoscopy and have not occurred before the prep, this should be communicated with the nurse before the procedure.

Is there a way for me to obtain an estimate of charges before the procedure?

Yes, you may call (208) 625-4484 to get an estimate of your costs.

Note: This information is primarily designed for patients with traditional Medicare as their primary insurance. If you have commercial or med advantage plan insurance, some of the information in this document may not apply. It is your responsibility to determine what your insurance benefits cover.