



Preventive Care Surcharge Guide



Small checkup.
**BIG
IMPACT.**

July 2025

¿Habla español?

Para obtener ayuda con el idioma, comuníquese con Aetna One® Advocate al **1-800-558-0860**.

Preventive care is the foundation for a healthier future

At CVS Health, we believe that preventive care is the foundation for a healthier future. Our clinical experts stand behind research showing that regular checkups and screenings help you stay ahead of potential health risks, manage conditions early, detect cancers at an early stage, and can lead to a healthier, fuller life. That’s why we say a small check-up can have a BIG impact.

For the 2025-2026 benefits plan year, we’re focused on the importance of preventive visits. As the leading health solutions company, we have the clinical expertise, sophisticated tools and knowledge to make the best health decisions – so let’s use these insights for ourselves.

In support of this commitment, we’re introducing a Preventive Care Surcharge for colleagues and spouses/partners enrolled in an Aetna medical plan. The program encourages getting an annual preventive care visit. This guide outlines important information you need to know and provides answers to frequently asked questions.

Oak Street Health and Signify Health colleagues on a Jan. 1 benefits plan year: The Preventive Care Surcharge does not apply to you at this time, though you are still encouraged to get your annual preventive care as an important step in managing your health.

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This publication provides a brief overview of company benefits and is for informational purposes only. If there's any difference between this and plan documents, official plan documents govern. CVS Health or your employer reserves the right to amend, modify or terminate all or part of its benefit plans at any time. This description isn't an employment contract or guarantee. Colleagues may need to meet certain eligibility requirements to participate. Colleague contributions are not used to pay plan expenses for vendors or other service providers that are subsidiaries of CVS Health, except as may be permitted by ERISA. Union colleagues are not covered unless their collective bargaining agreement specifically provides for a benefit therein.

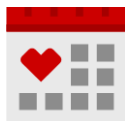
Top tips on the Preventive Care Surcharge



Applies to both **colleagues and spouses/partners** enrolled in an Aetna medical plan for the 2025-2026 plan year



Get your annual preventive care visit by **Aug. 31, 2025*** to **avoid the surcharge**



Per pay period surcharge begins **Nov. 1, 2025*** – \$35.71 (semimonthly) or \$33.33 (biweekly)



You have flexible **options for completing your annual preventive care visit**, including a virtual option – see below



You can **check the completion status** of your preventive care visit (see page 4 for details)

* If you enroll in an Aetna medical plan after July 1, 2025, your deadline and surcharge start date are different. See page 3 for details.

Choose one of these options for your preventive care visit



MinuteClinic® preventive care screening

[CVS.com/minuteclinic](https://cvsh.com/minuteclinic) > under **Select the care you need**, enter “**Preventive Care Screening – CVS Health Colleagues Only**” (both the colleague and spouse/partner should select this visit option) **OR** <https://ddl.cvs.com/ul/mc-employee-scheduling>

Watch for details about onsite events at select office and distribution center locations May – July 2025.



Preventive care screening with CVS Health Virtual Primary Care™

[CVS.com/virtual-care](https://cvsh.com/virtual-care) > under **Select the care you need**, enter “**Preventive Care Screening – CVS Health Colleagues Only**” (both the colleague and spouse/partner should select this visit option)



Annual preventive exam with a primary care provider (PCP)

Find a PCP: <https://www.aetnadocfind.com/cvshhealth2025/>

Appointment can be with a doctor, physician assistant or nurse practitioner at your PCP office.



Annual well-woman exam by your women’s health care provider or at a MinuteClinic, where available

Find a provider: <https://www.aetnadocfind.com/cvshhealth2025/> **OR** [CVS.com/minuteclinic/services/mens-and-womens-health](https://cvsh.com/minuteclinic/services/mens-and-womens-health) > Women’s Health > Annual Well Woman Exam

Lab tests are not needed to satisfy the Preventive Care Surcharge requirements. It is up to your provider to determine if they advise ordering lab tests (e.g., blood draws), including those covered under preventive benefits or additional tests. If you choose MinuteClinic for your preventive health screening, it includes lab tests.

If an additional exam or tests are given to diagnose or treat a suspected or identified injury or disease, it is not considered preventive, and costs may apply. Costs also may apply if you see an out-of-network provider. For MinuteClinic and CVS Health Virtual Primary Care, failure to adhere to the instructions above may result in services outside of a preventive care screening, potentially incurring additional costs.

MinuteClinic visit tips: Colleagues and spouses/partners should use **Preventive Care Screening – CVS Health Colleague Only** as the service type when scheduling your appointment. You and your spouse/partner will need to know your **CVS Health Employee ID number** when you register. At your appointment, be sure to say you are there for a colleague preventive care screening (or are a spouse/partner of a colleague there for the screening). Contact the HR Service Center at **1-888-694-7287** if you do not know your CVS Health Employee ID number.

Deadlines to keep in mind

If your benefits effective date is June 1, 2025

If you enroll in an Aetna medical plan **during annual enrollment for the 2025-2026 plan year** (whether enrolled for the 2024-2025 plan year or a new enrollee), here are key dates and steps:

- Preventive care visits to avoid the surcharge must occur **between June 1, 2024 and Aug. 31, 2025**. Otherwise, the surcharge will begin on Nov. 1, 2025.
- The pretax surcharge is assessed per individual, per pay period at \$35.71 (semimonthly) or \$33.33 (biweekly). This equals a \$500 annual charge over the seven-month period from Nov. 1, 2025 – May 31, 2026.
- If you and your spouse/partner are enrolled in a **CVS Health Aetna medical plan** at the time of the annual preventive care visit, record of the visit will be determined based on Aetna medical plan claims data. So, no form or further action is needed.
- If the visit occurred **after June 1, 2024 but while you or your spouse/partner were not enrolled in a CVS Health Aetna medical plan**, you must submit a completed Preventive Care Surcharge Physician Attestation form by Aug. 31, 2025, as record of your visit.
- The Aug. 31 deadline helps ensure that claims can be confirmed in advance of the surcharge period. If your visit occurs **before the Aug. 31 deadline**, and the claim is not processed until after that date, the surcharge will be stopped and any charges incurred will be refunded retroactively as soon as administratively feasible (up to 90 days).
- If the visit occurs **after the Aug. 31 deadline**, the surcharge will be removed for the remaining surcharge period as soon as administratively feasible, after record of the visit is processed (up to 90 days).

If your benefits effective date is during the 2025-2026 plan year

If you enroll in an Aetna medical plan **after July 1, 2025, as a new hire or after a life event (e.g., loss of prior coverage)**, here are key dates and steps:

- Preventive care visits to avoid the surcharge must occur **within a 120-day window from your benefits effective date**. Otherwise, the surcharge will begin in one to two pay periods from the end of that window.
- The pretax surcharge is assessed per individual, per pay period at \$35.71 (semimonthly) or \$33.33 (biweekly).
- If the visit occurred **after June 1, 2024 before you or your spouse/partner were enrolled in a CVS Health Aetna medical plan**, you can submit a completed Preventive Care Surcharge Physician Attestation form before the end of your window, as record of your visit. You can also complete a new visit, within your window, using the flexible visit options outlined on the prior page.
- If your visit occurs **before the end of your window**, and the claim is not processed until after that date, the surcharge will be stopped and any charges incurred will be refunded retroactively as soon as administratively feasible (up to 90 days).
- If the visit occurs **after the end of your window**, the surcharge will be removed for the remaining surcharge period as soon as administratively feasible, after record of the visit is processed (up to 90 days).

Sites and resources

To check the recorded status of your annual preventive care visit:



Colleague Zone > **My applications** > **View all** > **Benefits – Your Benefit Coverage** and scroll to view your Preventive Care Visit Status.

Or

Colleague Zone > **My applications** > **View all** > **ActiveHealth**. Click the gem icon to view your status — and use this well-being platform to access personalized pathways to reach your health goals.

For detailed instructions on checking your completion status, see the **Check Your Preventive Care Visit Status job aid** on **BenefitMoments.com**. Please note that it may take **up to six weeks** for your visit to be recorded.

If you have questions about your recorded visit status, call **Aetna One® Advocate** at **1-800-558-0860**.

To access the Preventive Care Surcharge Physician Attestation or Preventive Care Surcharge Accommodation form:



Colleague Zone > **My applications** > **View all** > **Benefits – Your Benefit Coverage** > **Library**.

To search for a primary care provider (PCP):



<https://www.aetnadocfind.com/cvshealth2025/>



If you need help finding a PCP or for questions on covered preventive care services, call **Aetna One® Advocate** at **1-800-558-0860**.

Frequently Asked Questions

Key topic areas (Click topic name to advance to that section):

- **Why a Preventive Care Surcharge?**
- **Already completed an annual preventive care visit**
- **More about options for your annual preventive care visit**
- **More information on coverage of your annual preventive care visit**
- **What does my spouse/partner need to do?**
- **What happens if I miss the deadline?**
- **Your health data and privacy**

Why a Preventive Care Surcharge?

How does this program align with our organization's mission and wellness goals?

Regular check-ups help you stay ahead of potential health risks, manage conditions early, and lead to a healthier, fuller life. They also help you build a relationship with a primary care provider you trust and prevent late detection of serious issues – keeping you out of the emergency room and reducing costly, avoidable health care.

As the leading health solutions company, we have the clinical expertise, sophisticated tools, and knowledge to make the best health decisions – so let's use these insights for ourselves. Our clinical experts stand behind the importance of preventive care, and we must too. The Preventive Care Surcharge is one component of our efforts for the 2025-2026 plan year designed to encourage colleagues and their spouses/partners to get annual preventive care visits.

Encouraging the completion of an annual screening is common among large employer health plans. Preventive care can reduce overall costs for employees through earlier detection of health issues and reduced use of costly alternatives like the emergency room and urgent care in the absence of regular preventive care.

How does getting preventive care benefit me?

Research shows that routine exams and health screenings save lives and lead to better health outcomes. Our medical doctors and clinical advisors agree – annual preventive care helps catch potential issues early and improve chances for successful treatment. It also helps you build a relationship with a provider you trust, fostering communication for more personalized health solutions. And, you'll avoid the surcharge by completing your annual preventive care visit.

I feel 100% healthy; why do I need an annual preventive care visit?

Annual preventive care visits are important for everyone – no matter your current health status. These visits can help set a baseline for future monitoring and detect potential issues that you may be unaware of.

Participation is voluntary. You and your spouse/partner can choose not to get an annual preventive care visit, but you'll **each pay** the Preventive Care Surcharge if you don't. The pretax surcharge is assessed **per individual**, per pay period at \$35.71 (semimonthly) or \$33.33 (biweekly).

Will the Preventive Care Surcharge apply to each new plan year moving forward?

Yes. Our commitment to preventive care is long-term. For this reason, colleagues and spouses/partners who are enrolled in a medical plan through CVS Health will need to complete an annual preventive care visit each year to avoid the per person surcharge.

Why is having a primary care provider (PCP) important in addition to having an annual preventive care visit?

Building a partnership with a PCP fosters open communication for more personalized health solutions. You have a place to turn when you need more immediate care, enabling earlier action to manage your health and avoiding expensive emergency room visits – which drive up costs for you and the company.

Why doesn't the Preventive Care Surcharge apply to Hawaii and Puerto Rico colleagues in Kaiser Permanente, HMSA or Triple S plans?

For the 2025-2026 plan year, this program is focused on our Aetna medical plan participants who make up the majority of our medical plan enrollments. This group has access to several options for obtaining an annual preventive care visit, with administrative processes for tracking related claims. All of our medical plans provide 100% coverage for in-network preventive services. All colleagues are encouraged to be proactive in managing their health through an annual preventive care visit. In the future, CVS Health will evaluate broadening program participation for more groups.

Already completed an annual preventive care visit

What completed visits count?

Annual preventive care visits that were completed on or after June 1, 2024, count. See **Choose one of these options for your preventive care visit** on page 2 to learn about options that count.

What visits do not count toward my annual preventive care visit?

Preventive screenings (i.e., colonoscopies, mammograms) and routine monitoring visits for ongoing health conditions (i.e., blood pressure, cholesterol, cancers) are not a substitute for an annual preventive exam.

Assuming my visit counts, do I have to do anything else?

The answer depends on if you were enrolled in a CVS Health Aetna medical plan at the time of your annual preventive care visit.

- If you were enrolled in a CVS Health Aetna medical plan at the time of your visit, record of the visit will be determined based on Aetna medical plan claims data. So, no form or further action is needed.
- If your visit occurred *before* you were enrolled in a CVS Health Aetna medical plan (and after June 1, 2024), you must submit a completed **Preventive Care Surcharge Physician Attestation form** by your preventive care visit deadline as record of your visit. This form is available on [**Colleague Zone**](#) > **My applications** > **View all** > **Benefits – Your Benefit Coverage** > **Library**.

How do I complete the Preventive Care Surcharge Physician Attestation form?

You will need to download the form from [**Colleague Zone**](#) > **My applications** > **View all** > **Benefits – Your Benefit Coverage** > **Library** and provide it to your physician to complete and sign it. Your physician may charge a fee to complete the form; you're responsible for payment.

More about options for your annual preventive care visit

Does an annual visit with a primary care provider (PCP) count?

Yes. If you don't have a PCP, visit the Aetna online provider directory at

<https://www.aetnadocfind.com/cvshealth2025/> or call Aetna One® Advocate at **1-800-558-0860** to find one. It can take several months to get an appointment for an annual visit with a PCP, so you may need to choose another method to ensure you meet your deadline for completion.

What if my doctor can't get me in before the Preventive Care Surcharge deadline?

You can schedule a MinuteClinic® preventive care screening or well-woman exam, if available in your area, or a preventive care screening with CVS Health Virtual Primary Care™. See **Choose one of these options for your preventive care visit** on page 2 for details on scheduling your appointment.

I want to see my current PCP but can't get an appointment before the visit deadline. If I use the MinuteClinic® or CVS Health Virtual Primary Care™ visit option to meet the deadline, may I still get my annual preventive care visit at my doctor's office in the same plan year, with 100% in-network coverage?

Yes, you may.

I visited my doctor this year, but not for a preventive physical (checkup); does that count for the Preventive Care Surcharge?

While we are glad to hear that you had a visit with your doctor, your visit won't count since it wasn't an annual preventive care visit. See **Choose one of these options for your preventive care visit** on page 2 to learn about options that will count.

For an annual preventive exam with a PCP, do I have to see a doctor? Can I schedule my annual preventive care visit with a physician assistant or nurse?

You can schedule your annual preventive care visit with a doctor, physician assistant or a nurse practitioner at your PCP office.

How do I get a preventive care screening at MinuteClinic®?

To find the MinuteClinic location closest to you and make an appointment, visit:

[CVS.com/minuteclinic](https://cvsl.com/minuteclinic) > under **Select the care you need**, enter "**Preventive Care Screening – CVS Health Colleagues Only**" (both the colleague and spouse/partner should select this visit option) **OR** <https://ddl.cvs.com/ul/mc-employee-scheduling>.

MinuteClinic visit tips: Colleagues and spouses/partners should use "**Preventive Care Screening – CVS Health Colleague Only**" as the service type when scheduling your appointment. You and your spouse/partner will need to know your **CVS Health Employee ID number** when you register. At your appointment, be sure to say you're there for a colleague preventive care screening (or are a spouse/partner of a colleague there for the screening). Contact the HR Service Center at **1-888-694-7287** if you don't know your CVS Health Employee ID number. Failure to adhere to these instructions may result in services outside of a preventive care screening, potentially incurring additional costs.

Watch for details about onsite events at select office and distribution center locations May – July 2025.

How does a CVS Health Virtual Primary Care™ preventive care screening work?

This option allows you to visit with a health care provider online from your computer, tablet or phone. It also helps establish a PCP relationship. Visit [CVS.com/virtual-care](https://www.cvs.com/virtual-care) to get started:

- **Choose your Provider:** You'll have a physician, a nurse practitioner to choose from. All physicians and nurse practitioners are board-certified in Family Medicine and work in care teams with a registered nurse and care coordinator.
- **Book your "Preventive Care Screening – CVS Health Colleagues Only" visit (often within 5 days):** You can choose to book a visit with the physician or nurse practitioner, for increased availability. The nurse on the Care Team will coordinate your care and help you set up appointments. Both the colleague and spouse/partner should select this visit option.
- **Get your welcome kit:** CVS Health Virtual Primary Care will send you a welcome kit that includes a blood pressure and heart rate monitor at no cost to you. You can opt out of receiving the kit if you don't want one. If you do choose to get one, you'll get it in the mail in 7-10 days and should bring it to your visit if possible. If you don't get it in time, it's ok.
- **Get help connecting with in-person specialists:** If needed, your virtual provider can refer you to an in-network provider, lab or specialist.

CVS Health Virtual Primary Care preventive care screening tip: Colleagues and spouses/partners should use **"Preventive Care Screening – CVS Health Colleague Only"** as the service type when scheduling appointments. Failure to do so may result in services outside of a preventive care screening, potentially incurring additional costs.

Note: If you do not already have a CVS account, you will be asked to register to get started if you access through [CVS.com/virtual-care](https://www.cvs.com/virtual-care).

How does a virtual preventive care screening compare to an in-person visit?

As noted above, a virtual visit enables a comprehensive care team to be involved in your care, with welcome kit materials available to you in advance such as a blood pressure and heart rate monitor, if you wish. You also can discuss the need for any biometrics during your visit.

As is true of an in-person visit, your virtual visit will include your provider asking you a series of questions about your health. The goal is the same – to explore key elements of your health that can confirm how you're doing or surface potential needs for further examination or treatment.

Why does a well-woman exam count as an annual preventive care exam for the surcharge?

Since many routine preventive tests and screenings are performed at an annual well-woman exam with a women's health provider or at a MinuteClinic®, where available, this visit also helps detect or prevent serious diseases and medical problems before they can become major.

More information on coverage of your preventive care visit

What types of visits or care don't count as an annual preventive care visit?

Primary care visits other than your annual preventive care visit (for example, if you see your doctor for flu symptoms) will not be coded as a preventive care visit.

Also, if an additional exam or tests are given to diagnose or treat a suspected or identified injury or disease, they are not considered a routine physical exam. And an exam given while the patient is confined in a hospital or other facility for medical care is not considered a routine physical exam. Additionally, routine monitoring visits for ongoing health conditions (i.e., blood pressure, cholesterol, cancers) are not a substitute for an annual preventive care visit.

Is diagnostic care the same as preventive care?

No. Diagnostic care differs from preventive care in that these services are not routine. With diagnostic care, your provider is looking for something specific, often based on the results of a preventive test or screening. For example, if your radiologist finds something on your mammogram and wants another mammogram, the second is considered diagnostic and typically is not covered as preventive care.

If an additional exam or tests are given to diagnose or treat a suspected or identified injury or disease, it is not considered preventive and costs may apply.

What can I do to help ensure my preventive care exam is covered at 100%?

If you are unsure if a service will be covered at 100%, check with your provider to confirm the service is part of the annual preventive care exam. It is okay to ask your provider what a service or test is for and how it will be coded for claims processing. As a patient, preventive care is designed to support lower out-of-pocket costs now to help avoid higher costs later due to delayed care.

Call Aetna One® Advocate at **1-800-558-0860** if you have questions about the coverage and costs of a particular service.

What does my spouse/partner need to do?

Is the process different for my spouse/partner than it is for me?

The process is basically the same (i.e., you and your spouse/partner have the same options for getting an annual preventive care visit) and the surcharge applies to each of you.

What if I enroll my spouse/partner in an Aetna medical plan after July 1, 2025, due to a life event (e.g., loss of prior coverage)?

In this case, the deadline for your spouse/partner to get an annual preventive care visit, along with when the surcharge begins if they don't get one, will depend on their benefits effective date. See page 3 for more information about deadlines.

What happens if I miss the deadline?

If I don't get my annual preventive care visit, when will I start seeing the Preventive Care Surcharge?

When the surcharge begins depends on when you enrolled in your health plan and your benefits effective date. See page 3 to determine when charges would apply to you. On your paystub, the charge will display as "PreventiveCare".

How much is the charge from my paycheck?

The pretax surcharge is assessed per individual, per pay period at \$35.71 (semimonthly) or \$33.33 (biweekly), up to \$500 per plan year.

What if I completed my annual preventive care visit by the deadline but my physician was late in submitting my claim?

As long as your visit took place within the required timeframe, the surcharge will be removed. Any charges incurred will be refunded as soon as administratively feasible, after record of the visit is processed (up to 90 days).

Can I still complete an annual preventive care visit after the deadline? Will charges stop if I do?

Yes. Once you or your spouse/partner complete your visit, the surcharge will be removed for future pay periods as soon as administratively feasible, after record of the visit is processed. It can take up to **90 days** due to provider and administrative claims processing.

What if I'm not medically able to get an annual preventive care visit?

You can submit a **Preventive Care Surcharge Accommodation form** signed by your treating physician stating that it is unreasonably difficult due to a complex or specific medical condition to obtain an adult preventive visit at this time. This form is available on [Colleague Zone](#) > **My applications** > **View all** > **Benefits – Your Benefit Coverage** > **Library**.

If the form is submitted and approved before the preventive visit deadline, no surcharge will apply for the 2025-2026 plan year. If the form is submitted and approved after the preventive visit deadline, the surcharge will be stopped and any charges incurred will be refunded as soon as administratively feasible (up to 90 days).

Your health data and privacy

How is my privacy protected?

By law, any access to personally identifiable health data is strictly limited only to those entities that need it to serve your health care and wellness. In accordance with the Health Insurance Portability and Accountability Act (HIPAA), any personally identifiable results will only be available to you and the vendor partner providing your annual preventive care visit. That includes:

- MinuteClinic® for the MinuteClinic preventive health screening or well-woman exam
- Your Care Team for CVS Health Virtual Primary Care™
- Your provider for your annual preventive exam or well-woman exam

CVS Health Human Resources only receives a record of whether the annual preventive care visit was completed, for the purpose of administering the Preventive Care Surcharge program. Data is only shared on an aggregate, de-identified basis to help summarize population health metrics and inform priorities for health benefit design, lifestyle and disease management program support, and effective education and promotion of resources.

Since MinuteClinic® and CVS Health Virtual Primary Care™ are part of CVS Health, how do I know my personal health information is protected and secure?

As noted above, HIPAA requires protection of your personal health information (PHI). Further, our companies' systems and technology employ multiple levels of data security to ensure protection of your information.

Will my health data affect the Preventive Care Surcharge amount and/or my medical premiums?

No. Your personal results are for your use only, to help you know your numbers and improve your health and overall wellness. Your results do not affect the Preventive Care Surcharge amount or your medical premium contributions.