



Please Note: The following may impact your Medicare coverage.

Excellus BlueCross BlueShield wants to ensure you are aware of National Coverage Determinations. A National Coverage Determination is a decision by the Centers for Medicare & Medicaid Services (CMS) to pay and/or deny an item or service. These decisions may impact your existing coverage under your Excellus BlueCross BlueShield Medicare plan.

If you have questions about your coverage, please call Customer Care toll-free at 1-877-883-9577 (TTY/TDD users call 1-800-421-1220). Hours are Monday through Friday, 8 a.m. to 8 p.m. If you are calling between October 1 – February 14, representatives are available seven days a week from 8 a.m. – 8 p.m.

CMS has issued the following National Coverage Determination:

Effective for dates of service on or after October 9, 2014, The Cologuard™ test is covered once every three years for Medicare members that meet all of the following criteria:

- Age 50 to 85 years
- Have no signs or symptoms of colorectal disease including but not limited to lower gastrointestinal pain, blood in stool, positive guaiac fecal occult blood test (gFOBT) or fecal immunochemical test (iFOBT).
- Are at average risk of developing colorectal cancer:
 - No personal history of adenomatous polyps, colorectal cancer, or inflammatory bowel disease, including Crohn's Disease and ulcerative colitis.
 - No family history of colorectal cancers or adenomatous polyps, familial adenomatous polyposis, or hereditary nonpolyposis colorectal cancer.

There is no coinsurance or deductible amount paid by eligible members for this test if done by an authorized laboratory.

Effective Date: October 9, 2014

Reference: NCD 210.3 The Cologuard™ - Multitarget Stool DNA (sDNA) Test

Excellus BlueCross BlueShield contracts with the federal government and is an HMO and PPO plan with a Medicare contract. Enrollment in Excellus BlueCross BlueShield depends on contract renewal.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits and/or co-payments/coinsurance may change on January 1 of each year.