



	Screening	Diagnostic
Why	<ul style="list-style-type: none"> • Routine testing for patients without symptoms • Further testing may be done if a screening finds a possible abnormality 	<ul style="list-style-type: none"> • Testing to investigate symptoms or a possible abnormality found during a screening
Who	<ul style="list-style-type: none"> • For patients without symptoms 	<ul style="list-style-type: none"> • For patient with symptoms • For patients whose screening showed a possible abnormality
When	<ul style="list-style-type: none"> • Check with your physician and insurance company for eligibility factors based on age, gender, family history • There may be requirements 	<ul style="list-style-type: none"> • As soon as possible after a screening shows an abnormality • Screening may become diagnostic if abnormality found during the course of testing
Referral	<ul style="list-style-type: none"> • May require a referral from a physician • Check with your insurance company 	<ul style="list-style-type: none"> • May require a referral from a physician • Check with your insurance company
Cost	<ul style="list-style-type: none"> • Copays typically do not apply • Check with your insurance company to determine which screening tests are covered and how often 	<ul style="list-style-type: none"> • Copays or other out of pocket costs may apply • Check with your insurance company to determine which diagnostic tests are covered and requirements

For more information regarding your test, go to ccf.org/health.