

PREVENTIVE HEALTH SERVICES AND SCREENINGS

Certain preventive care services may only be covered based on what is recommended for your age and/or gender. Some services may also require a specific screening, condition, or risk factor related diagnosis in order to be covered at no cost to you. Preventive care services may not be performed for the primary reason of diagnosing or treating an illness or injury.

Preventive Health Services for Adults:

- Abdominal Aortic Aneurysm (one-time) Screening – men ages 65-75 with a diagnosis of Nicotine Dependency
- Alcohol Misuse Screening & Counseling
- Anemia Screening – **up** to age 21
- Cholesterol (Lipid Disorder) Screening
- Colorectal Cancer Screening –ages 45 and older
 - Includes screening colonoscopy, sigmoidoscopy, fecal occult blood test (FOBT) and Cologuard®
- Counseling to Promote a Healthy Diet and Physical Activity for Cardiovascular Disease Prevention – for adults with cardiovascular risk factors
- Dyslipidemia Screening – up to age 21
- Depression Screening
- Diabetes Screening - ages 35 -70
- Fall Prevention - ages 65 and older (Starting 1/1/ 2025)
- Hearing testing – up to age 21
- Hepatitis B Screening
- Hepatitis C Screening – up to age 79
- High Blood Pressure Screenings outside of a clinical setting
 - Screenings Inside a clinical setting are included in the code for a wellness visit.
- HIV screening
- HIV Infection: Acquisition of HIV prevention
- Latent Tuberculosis Infection Testing and Office Visit
- Lung Cancer Screening – ages 50-80
- Obesity Screening and Counseling, including nutritional therapy.
- Physician Wellness Visit
- Sexually Transmitted Infection (STI) Prevention Counseling & Screening – includes Chlamydia, Gonorrhea, Syphilis
- Skin Cancer Prevention Counseling – up to age 24
- Sudden Cardiac Arrest- up to age 21
- Tobacco Use Screening, Counseling & Interventions
- Tuberculin Testing (TB skin test)
- Vaccinations/Immunizations (includes Immunization administration):
 - Coronavirus Disease [Covid-19] Vaccine
 - Diphtheria, Pertussis and Tetanus – includes:
 - Tetanus and Diphtheria (Td)
 - Tetanus, diphtheria toxoids and acellular Pertussis (Tdap)
 - Diphtheria, tetanus an acellular Pertussis, hepB, and polio inactive (DTaP-HepB-IPV)
 - Diphtheria, tetanus toxoids, acellular pertussis, haemophilus influenza B, and polio inactive (DTap-IPV/Hib)
 - Hepatitis A (HepA, HepA-HepB)
 - Hepatitis B (HepB, HepA-HepB, Hib-HepB)

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- Haemophilus influenza B (Hib, Hib-HepB)
- Human Papilloma Virus (HPV) – up to age 26, special exceptions may be granted up to age 45 for at risk individuals.
- Influenza (seasonal flu)
- Measles, Mumps, Rubella (MMR)
- Meningococcal (MenB, MenB-4C, MenB-FHbp, MPSV4, MCV4, MenACWY-CRM)
- Pneumococcal (pneumonia)– includes:
 - pneumococcal polysaccharide vaccine, 23-valent (PPSV23)
 - pneumococcal conjugate vaccine, 13-valent (PCV13)
- Polio (IPV)
- Rotavirus (RV1, RV5)
- RSV – age 60 and up or with if billed with a pregnancy diagnosis.
- Varicella/Chicken Pox (VAR)
- Zoster/Shingles (HZV/ZVL, RZV) – ages 50 and older
- Visual Acuity/Screening – up to age 21

Preventive Health Services for Women:

- Breast Cancer Screening & Counseling Services, including:
 - Breast Cancer Preventive Medication Counseling (Chemoprevention)
 - Breast Cancer Risk Evaluation and Genetic Counseling
 - Breast Cancer Risk Testing (BRCA 1 & 2)
 - Breast Cancer Mammography Screening - ages 40 and older
- Cervical Cancer Screening (Pap Smear) – ages 30 - 65
- Contraception & Sterilization
 - For medications, refer to on our [Prescription Drug formulary](#). Prescriptions filled using the pharmacy benefit.
 - Benefit includes, but is not limited to, IUD insertion/removal, tubal ligation, diaphragm fitting, subdermal implant systems.
- Domestic & Interpersonal Violence Screening & Counseling
 - Included in the code for a wellness visit.
- Human Papilloma Virus (HPV) DNA Testing
- Osteoporosis Screening (bone density) - ages 60 and older
- Prenatal/Postnatal Screenings & Services:
 - Bacteriuria Screening
 - Breastfeeding Support & Counseling, including Lactation Classes
 - Breast Pumps – If ordered by a licensed professional after the birth of a child. Coverage is limited to one standard manual, simple breast pump or one basic single electric pump. A hospital-grade model is not covered.
 - Folic Acid – pregnant females or of child-bearing age
 - If ordered by physician and a prescription is received from the provider.
 - For medications, refer to on our [Prescription Drug formulary](#). Prescriptions filled using the
 - pharmacy benefit
 - Gestational Diabetes (during and after pregnancy)
 - Gonorrhea Screening
 - Hepatitis B Screening
 - Prenatal office visits
 - Rh Incompatibility Screening
 - RSV Immunization– if billed with a pregnancy diagnosis.

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- Rubella Screening
- Well Woman Visits

Childhood Preventive Services:

- Physician Wellness Visit – includes well child, well baby, and psychosocial/behavioral assessments.
- Alcohol Misuse Screening & Counseling – ages 12 and older
- Anemia Screening
- Autism Screening – ages 0-3
- Behavioral Assessments – included in the code for a wellness visit.
- Childhood Vaccinations/Immunizations (includes Immunization administration):
 - Coronavirus Disease [Covid-19] Vaccine
 - Diphtheria, Pertussis and Tetanus – includes:
 - Diphtheria and tetanus (DT) – ages 0-6
 - Diphtheria, tetanus, and acellular Pertussis (DTap) – ages 0-6
 - Diphtheria, tetanus toxoids, acellular pertussis, and polio inactive (DTap-IPV) – ages 4-6
 - Diphtheria, tetanus toxoids, acellular pertussis, haemophilus influenza B, and polio inactive (DTap-IPV/Hib)
 - Diphtheria, tetanus, and acellular Pertussis, hepB, and polio inactive (DTaP-HepB-IPV)
 - Tetanus and Diphtheria (Td)
 - Tetanus, diphtheria toxoids and acellular Pertussis (Tdap)
 - Haemophilus influenza B (Hib, Hib-HepB)
 - Hepatitis A (HepA, HepA-HepB)
 - Hepatitis B (HepB, HepA-HepB, Hib-HepB)
 - Human Papilloma Virus (HPV) – ages 9 and up.
 - Polio (IPV)
 - Influenza (seasonal flu)
 - Measles, Mumps, Rubella (MMR)
 - Meningococcal (MenB, MenB-4C, MenB-FHbp, MPSV4, MCV4, MenACWY-CRM, Hib-MenCY)
 - Hib-MenCY - **ages 0-2.**
 - All others allowed any age.
 - Pneumococcal (pneumonia)– includes:
 - pneumococcal polysaccharide vaccine, 23-valent (PPSV23)
 - pneumococcal conjugate vaccine, 13-valent (PCV13)
 - Rotavirus (RV1, RV5)
 - Varicella/Chicken Pox (VAR)
- Dental caries (fluoride application)
- Depression Screening
- Dyslipidemia Screening —ages 2– 21
- Gonorrhea Preventive Medication
 - For medications, refer to on our [Prescription Drug formulary](#). Prescriptions filled using the pharmacy benefit.
 - Rotavirus (RV1, RV5)
 - Varicella/Chicken Pox (VAR)
- Iron Supplements – if ordered by physician and a prescription is received from the provider.
 - For medications, refer to on our [Prescription Drug formulary](#). Prescriptions filled using the pharmacy benefit.

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- Hearing Testing
- HIV screening
- HIV Infection: Acquisition of HIV prevention
- Lead Poisoning Screening
- Obesity Screening and Counseling, including nutritional therapy – ages 6-18.
- Physician Wellness Visit includes Well Child, Well Baby, Psychosocial/Behavioral Assessments
- Sexually Transmitted Infection (STI) Prevention Counseling & Screening – includes Chlamydia, Gonorrhea, Syphilis
- Skin Cancer Prevention Counseling
- Sudden Cardiac Arrest – ages 11 and up
- Tobacco Use Screening, Counseling & Interventions
- Vision Screening ages 0 - 5

Newborn Screening (up to age 1):

- Hearing/Auditory Screening
- Metabolic Screenings
- Phenylketonuria (PKU) Screening
- Sickle Cell Screening

These guidelines were developed based upon the requirements set forth by the Affordable Care Act (ACA). They use the recommendations as established by the United States Preventive Services Task Force (USPSTF) – A & B recommendations, Health Resources and Services Administration (HRSA) for Women’s Preventive Services, and the American Academy of Pediatrics Bright Futures program.

We will review the guidelines no less than annually. They may be updated at any time upon review and formal approval of the Benefit & Code Coverage Committee should any of the above-mentioned agencies announce updated recommendations or standards.

Website References

United States Preventive Services Task Force (USPSTF)
<https://www.uspreventiveservicestaskforce.org/uspstf/>

Health Resources and Services Administration (HRSA)
<https://www.hrsa.gov/womens-guidelines>

American Academy of Pediatrics (AAP) Bright Futures
<https://www.aap.org/en/practice-management/bright-futures>

More information about the preventive services coverage required under the Affordable Care Act (ACA) please visit: <https://www.healthcare.gov/coverage/preventive-care-benefits/>