

# Preventive Care

Many of our plans cover preventive care 100 percent\* — that means no copay, coinsurance, or deductible.

For services to be covered as preventive, your doctor must bill claims with preventive codes. If a preventive service identifies a condition that needs further testing or treatment, regular copays, coinsurance, or deductibles may apply. Unless otherwise indicated, these services are generally covered once every 12 months. Additional limitations may apply. To see if your service or supply is considered preventive, call Member Services.

## ADULT PREVENTIVE SERVICES

*(Ages 18 and older)*

### LABORATORY TESTS

- Basic Metabolic Panel/  
Comprehensive Metabolic Panel
- General Health Panel
- Complete Blood Count (CBC)
- Thyroid (TSH)
- Prostate Cancer Screening (PSA)
- Diabetes Screening
- Urinalysis
- Cholesterol Screening
- Gonorrhea Screening
- Human Papilloma (HPV) Testing
- Chlamydia Screening
- Human Immunodeficiency Virus (HIV) Screening
- Syphilis Screening
- Tuberculosis (TB) Testing

### PROCEDURES

- Pap Test
- Screening Mammogram
- Colon Cancer Screening
- Abdominal Aortic Aneurysm (males only, once between ages 65 and 75)
- Bone Density/DEXA (once every two years in women ages 60 and older)
- Permanent Sterilization Procedures (such as tubal ligations and vasectomies)\*\*

## EXAMINATIONS/COUNSELING

- Physical Exam
- Eye Exam
- Tobacco Use Counseling
- Alcohol Misuse Screening and Counseling
- Hearing Screening (ages 65 and older)
- Glaucoma Screening
- Sexually Transmitted Infections Counseling
- Dietary Counseling (only for certain diet-related chronic diseases)

## IMMUNIZATIONS

- Influenza
- Tetanus or Tetanus, Diphtheria, and Pertussis (Td, Tdap)
- Pneumococcal
- Hepatitis A
- Meningitis
- Zoster (ages 60 and older)
- Human Papilloma Virus (HPV) (ages 9 to 26)

## CONTRACEPTION\*\*

- Diaphragms
- Cervical Caps
- IUDs
- Generic Oral Contraceptives
- Plan B



## PEDIATRIC PREVENTIVE SERVICES *(Younger than age 18)*

### EXAMINATIONS/COUNSELING

- Well-Child Visit (preventive when billed on the following schedule: birth; 2 to 4 days; 2 to 4 weeks; 2, 4, 6, 9, 12, 15, and 18 months; ages 2, 2 1/2; once a year from ages 3 to 18)
- Eye Exam
- Developmental Testing
- Newborn Hearing Screening (younger than age 1)
- Hearing Screening (ages 10 and younger)

### LABORATORY TESTS

- Newborn Metabolic Screening (younger than age 1)
- PKU Screening (younger than age 1)
- Thyroid (younger than age 1)
- Sickle Cell Disease Screening (younger than age 1)
- Lead Screening
- HIV Screening
- TB Testing

### IMMUNIZATIONS

*(As recommended by the CDC/ACIP)*

- Measles, Mumps, Rubella (MMR)
- Diphtheria, Tetanus, Pertussis (Dtap, DT, DTP)
- Haemophilus Influenzae Type B (Hib, DtaP-Hib-IPV, DTP-Hib, Dtap-Hib)
- Hepatitis B (HepB)
- Polio (OPV, IPV, DtaP-Hep-LPV)
- Influenza
- Pneumococcal
- Hepatitis A
- Hepatitis B
- Meningitis
- Varicella (including MMVR)
- Rotavirus
- Human Papilloma Virus (HPV) (ages 9 to 26)

## OBSTETRICAL PREVENTIVE SERVICES

These are specific to pregnant women. To determine which additional non-obstetrical services may be considered preventive, please refer to the Adult or Pediatric Preventive Services lists.

### LABORATORY TESTS

- Iron Deficiency Anemia Screening
- Diabetes Screening
- Urine Study to Detect Asymptomatic Bacteriuria (first prenatal visit or at 12 to 16 weeks gestation)
- Rubella Screening
- Rh(D) Incompatibility Screening
- Lead Screening
- Hepatitis B Infection Screening (at first prenatal visit)
- Gonorrhea Screening
- HPV Testing
- Chlamydia Screening
- HIV Screening
- Syphilis Screening
- TB Testing

### BREAST-FEEDING SUPPLIES AND SUPPORT\*\*

- Breast Pump, Electronic AC or DC (one per birth)
- Lactation Class (one per birth at a SelectHealth-approved facility)

**Questions? Call Member Services at 801-442-5038 (Salt Lake area) or 800-538-5038 weekdays, from 7:00 a.m. to 8:00 p.m., and Saturdays, from 9:00 a.m. to 2:00 p.m.**

\*See your member materials for details about your preventive care benefits.

\*\*Effective 08/01/12 for most plans

