

Understanding your coverage

The right preventive services at the right time can help you stay healthy by detecting potential health problems while they can still be prevented or are at a stage that is easy to treat.



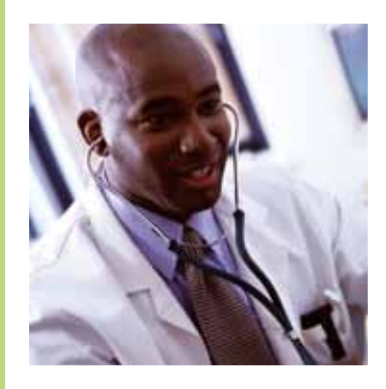
2012 Preventive Health Care Guidelines

Preventive services are immunizations, screenings, lab tests and other services that either help prevent illness or help find diseases or medical problems before you experience symptoms.

The Preventive Health Care Guidelines are based on national recommendations and evidence-based medical research on which services are effective for detecting and preventing illness. Some examples of common preventive services include:

- Certain tests to screen for cancer
- Checks of your blood pressure and cholesterol levels
- Physical exams
- Vaccines against common diseases like the flu or pneumonia

Different preventive services are needed over time depending on the kinds of health issues that emerge at different stages of life. This document contains a full list of recommended preventive services by age group.



▶ Sometimes a doctor may provide or order certain services more frequently than suggested in these guidelines. This decision may be based on your personal or family health history. When this happens, these services are still considered preventive and your plan's deductible will not apply.

*If applicable to your coverage. Please refer to your plan documents for the deductible, copayment and/or coinsurance amounts that apply to your coverage.

How Priority Health covers preventive services

When services listed are performed for preventive purposes, Priority Health will pay for them as follows:

- If your plan is not grandfathered*, these services will be covered at 100%. You will not need to pay anything.
- If your plan is grandfathered*, these services will be covered at your preventive health care services benefit level. If your plan covers prescription drugs, the drugs listed here will be covered according to your prescription drug plan. If your plan does not cover prescription drugs, the drugs listed here are not covered by Priority Health.

Sometimes a doctor may provide or order these approved preventive services more frequently than suggested in these guidelines. When this happens, these approved preventive services are still considered preventive and your plan's deductible will not apply.

When are services preventive?

Not all tests and screenings that your doctor may recommend for you are preventive services. Tests and services to monitor, diagnose or treat diseases, even if listed here, may not be covered as preventive services in some situations.

If the services you receive are not preventive services, your deductible will apply, along with applicable office visit copays and coinsurance for tests and screening.

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Refer to pages 4 and 5 for common examples of preventive and non-preventive services.

*A plan's grandfathered status under the Affordable Care Act is determined at the first renewal after March 23, 2010, and each renewal after that date. Please ask your employer if your plan is a grandfathered plan. Or you may call our Customer Service department using the phone number on the back of your member ID card.

Here are some examples:

- If you have a chronic disease, your doctor may run certain tests on a regular basis to monitor your condition. Because these tests are part of managing your illness, they're not considered preventive services.
- If you have a preventive screening and the results indicate a health problem, your doctor may run additional tests to help diagnose the condition or confirm a diagnosis. Such follow-up tests are not considered preventive services.
- If your doctor orders tests based on existing symptoms, these tests would not be considered preventive services.
- If your doctor recommends a screening or test that is not on this list, your deductible and applicable copayments and coinsurance will apply. Sometimes a doctor may recommend a test that is not on this list. In some cases, there is not enough medical evidence to suggest that it has an overall benefit. It is important to talk to your doctor and understand why your doctor thinks a service is right for you.

Examples of preventive and non-preventive services

Before you have a test or service, it is good to understand if it will be covered as a preventive service in your plan. Remember — if the service is not preventive, your deductible, copays and coinsurance may apply. The examples in the chart below may help.

Service	It's preventive when ...	It's diagnostic when ...
Colorectal cancer screening	<p>Your doctor recommends a routine colonoscopy or sigmoidoscopy to screen for early signs of colorectal cancer based on your age or family history.</p> <p>A polyp (an abnormal growth that can sometimes be precancerous) is discovered and removed during your preventive colonoscopy. The screening colonoscopy and removal of the polyp are preventive.</p>	<p>You're having a colonoscopy or sigmoidoscopy to diagnose a health problem you're having, such as bleeding or irregularity.</p> <p>A sample of a polyp removed during a preventive colonoscopy is sent to a lab to be tested for cancer. The pathology testing (if needed) is diagnostic.</p>
Diabetes screening	A blood glucose test is used to detect whether you have a problem with your blood sugar control, even though you may not have any symptoms.	You've already been diagnosed with diabetes and your doctor checks your glucose control regularly over time using a different test called "A1c."
Cervical cancer screening	You get a Pap test to determine whether you have early signs of cervical cancer.	Your doctor recommends you also get a human papillomavirus (HPV) test, either to diagnose whether an HPV infection may be causing abnormal cells in your cervix or to provide an additional level of screening for cervical cancer.
Osteoporosis screening	Your doctor recommends a bone density test to screen for early signs of osteoporosis based on your age or family history.	You're having a bone density test to diagnose a health problem you're having or you've already been diagnosed with osteoporosis and your doctor uses a bone density test to determine the success of a type of treatment.

Examples of preventive and nonpreventive services *(continued)*

Service	It's preventive when ...	It's diagnostic when ...
Metabolic panels	Not preventive	Your doctor recommends that you have a metabolic panel to check certain aspects of your blood chemistry. This test is not considered a preventive service, because there's not enough medical evidence to show that it helps detect or prevent treatable diseases before symptoms occur. Sometimes this test is done to monitor the effects of a health condition or treatment on different functions in your body. In either case, the test is considered diagnostic.

Get answers

If you have questions about preventive services, please call the Customer Service number on the back of your Priority Health ID card.

When does the deductible apply?

If you have a chronic disease and your doctor runs certain tests to monitor your condition, these are not considered preventive and will be subject to your deductible.

If you seek preventive care and your doctor runs additional, non-routine tests to diagnose or confirm the diagnosis for a health condition, those tests are not considered preventive. Your deductible will apply.

If you require follow-up visits or treatments for a condition found during a preventive exam, those costs will be subject to your deductible.

Doctors sometimes recommend tests that are not proven to be medically necessary. Your deductible will apply to the cost of tests that are considered medically unnecessary. Be sure to talk to your doctor to understand why he/she recommends these services.

Physical exam frequency

Age	Recommendation
Newborns	Two to 3 days after discharge.
0 to 2 years	Well-child visits at 2, 4, 6, 9, 12, 15, 18 and 24 months.
3 to 6 years	Routine visit at 30 months. One visit every 12 months for ages 3 to 6 years.
7 to 10 years	One visit every 12 to 24 months.
11 to 18 years	One visit annually.
19 to 21 years	One visit every 2 to 3 years, annually if desired.
22 years to 64 and older	One visit every 24 months, annually if desired.
65 and older	One visit every year.

Immunization vaccines for newborns to age 18

(Doses, recommended ages and who should have these immunizations vary.)

Immunizations	Recommendation
Diphtheria, tetanus, pertussis (DTaP/Tdap/Td)	DTaP at ages 2, 4 and 6 months, once between 15 and 18 months, and once between 4 and 6 years. Tdap once between ages 11 and 12 followed by a Td booster every 10 years. A single dose of Tdap between ages 7 and 10 if missed a vaccine at age 2, 4 or 6 months, between 15 and 18 months, or between 4 and 6 years. A single dose of Tdap for anyone 18 or younger who has not already received it, regardless of when the last Td was given.
Haemophilus influenzae type b	At ages 2, 4, 6 and 18 months. The fourth dose may be given as early as 12 months if 6 months have elapsed since the third dose and the child is considered unlikely to return at age 12 to 15 months.
Hepatitis A	Two doses at least 6 months apart between ages 12 and 23 months. Between ages 2 and 12 years, at physician's discretion: two doses at least 6 months apart if not vaccinated previously and at high risk. Two doses at least 6 months apart for all adolescents up to age 18.
Hepatitis B	Three doses in the first 18 months. First dose of Hep B to be administered to all newborns before leaving the hospital, second dose between 1 and 2 months, and third dose between 6 and 18 months. May begin a three-dose series between ages 2 to 18 years if not vaccinated in infancy.
Human papillomavirus	Three-dose series between ages 9 and 18 years, but best given between 11 and 12 years. On a 0-, 2- and 6-month schedule for females. The second dose to be given at least 4 weeks after the first. The third dose to be given at least 12 weeks after the second. There must be 24 weeks between the first and third dose.
Inactivated poliovirus	At ages 2, 4 and between 6 and 18 months, once between ages 4 and 6 years.
Influenza	Annually, healthy children between ages 6 months and 8 years. Two doses every year separated by four weeks if receiving for the first time or were vaccinated during the previous flu season but only received one dose. One dose annually for children 2 years and older.
Measles, mumps, rubella (MMR)	Two vaccinations, the first between ages 12 and 15 months. MMR vaccinations should never be given less than 1 month apart. Second vaccination given between ages 4 and 6 years. After age 7, two doses if not previously vaccinated or no history of disease.
Meningococcal	One dose between ages 11 and 12 years with booster dose at age 16. One dose to previously unvaccinated college freshman living in a dormitory. Two doses 2 months apart between ages 2 and 18 if high risk (HIV, non-functional spleen, etc). Catch up all adolescents 13 and older who have not had Tdap.
Pneumococcal	For all children ages 23 months and younger, four doses at 2, 4, 6 and 12 to 15 months.
Rotavirus	At 2, 4 and 6 months.
Varicella	One vaccination between ages 12 and 15 months. Children between ages 12 months and 12 years can get one dose if they have no history of varicella. Second dose to be given between 4 and 6 years. Two-dose series for children between 7 and 18 years if no history of varicella and no previous vaccination.

Assessments and screenings newborn to age 18

Assessments, screenings and counseling	Recommendation
Alcohol and drug use assessment	All adolescents, during each visit between ages 11 and 18 years.
Anticipatory guidelines as defined by Bright Futures	For all children throughout their development, at physician discretion.
Autism screening	Children between 18 and 24 months.
Blood pressure	Every year beginning at age 3.
Cervical dysplasia/cancer screening	All sexually active females.
Chlamydia infection, gonorrhea and syphilis screenings Sexually transmitted infection screenings	All sexually active females to be screened for chlamydia, gonorrhea, syphilis and HIV.
Congenital hypothyroidism screening	Newborns.
Depression screening and behavioral assessments	Children of all ages.
Developmental screening	Children under the age of 3 to be screened at 9, 18 and 30 months followed by checkups throughout their development.
Dyslipidemia screening	Risk assessment at 2, 4, 6, 8 and 10 years old, then every year through age 18. (Routine lab testing not recommended but may be done for children identified as high risk.)
Gonorrhea preventive medication	For the eyes of all newborns.
Hearing loss screening	All newborns and at ages 3, 4, 5, 6, 8, 10, 12, 15, 18 years. After age 11 if high risk.
Height, weight and body mass index/percentile measurements	Height and weight at each visit up to age 2. Starting at age 2, body mass percentile at each visit.
Hematocrit or hemoglobin screening	Once at 12 months, once between ages 11 and 18, and once annually for menstruating adolescents.
Lead screening	Blood lead test at 12 and 24 months for children at high risk. Risk assessment for lead exposure between ages 6 and 12 months, at 24 months, and between the ages of 2 and 6 years.
Medical history	All children throughout their development at each well-child visit.
Newborn screenings as identified by the federal Health Resources and Services Administration	Once at birth. Screenings include but are not limited to phenylketonuria (PKU) and sickle cell disease.
Obesity screening and physical activity and nutrition counseling	Screen for obesity and offer to refer overweight children for counseling to improve weight.
Oral health risk assessment	Children at 12, 18, 24 and 30 months of age and for children ages 3 and 6 years.
Sexually transmitted infection (STI) prevention counseling	For young adults 18 and younger at high risk.
Tobacco-use screening and counseling	For young adults 18 and younger during each visit. Includes cessation intervention for tobacco users and expanded counseling for pregnant tobacco users.
Tuberculin (TB) testing	Children at high risk for tuberculosis.
Vision screening	All children at ages 3, 4, 5, 6, 8, 10, 12, 15 and 18 years.

Immunization vaccines for adults

(Doses, recommended ages, and who should have these immunizations vary.)

Assessments, screenings and counseling	Recommendation
Hepatitis A	Two doses for high risk groups.
Hepatitis B	Three doses for high risk groups.
Herpes zoster	One dose at age 60 and older.
Human papillomavirus	Three-dose series between ages 19 and 26 on a 0-, 2- and 6-month schedule for females. The second dose to be given at least 4 weeks after the first. The third dose to be given at least 12 weeks after the second. There must be 24 weeks between the first and the third dose.
Influenza	Every year
Measles, mumps, rubella (MMR)	One to two doses if not vaccinated previously or no history of disease. For high risk groups between ages 40 and 64 and if at risk after 65.
Meningococcal	Between ages 19 and 24, one dose if not vaccinated previously. For high-risk groups age 40 and older.
Pneumococcal	One dose after age 65. If high risk, one dose before age 65 followed by booster dose after age 65.
Tetanus, diphtheria and pertussis (Tdap/Td)	One dose of Tdap if pertussis booster not received previously regardless of when last tetanus vaccine was given. Follow with Td every 10 years.
Varicella	Two-dose series for adults if no history of varicella and no previous vaccination.

Assessments and screenings for adults

Assessments, screenings and counseling	Recommendation
Abdominal aortic aneurysm screening	One-time screening for men between the ages of 65 and 75 who have ever smoked.
Alcohol misuse screening and behavioral counseling	All adults during physical exam.
Anticipatory guidance for family and intimate partner violence, breast self-exam, menopause counseling, safety, falls and injury prevention	At physician discretion for all adults.
Bacteriuria screening with urine culture (urinary tract or other infection screening)	Pregnant women between 12 and 16 weeks gestation or during first prenatal visit if later.
Blood pressure screening	All adults during physical exam.
Breast cancer screening	Mammogram every 1 to 2 years for women between the ages 40 and 49. Every year for ages of 50 and older.
Breast-feeding counseling	Interventions to support and promote breastfeeding for new mothers during pregnancy and after birth.
Cervical dysplasia/cancer screening	Start screening at beginning of sexual activity or at age 21, whichever is first. Annual screening up to age 30. For ages 30 and older, screening every 2 to 3 years. Suggest stopping at age 70 if three or more normal Pap tests in a row, no abnormal Pap test in previous 10 years, and not at high risk.
Chlamydia infection, gonorrhea and syphilis screenings Sexually transmitted infection	All sexually active adults to be screened for chlamydia, gonorrhea, syphilis, and HIV.
Colorectal cancer screening	Beginning at age 50, one of the following screening options: <ul style="list-style-type: none"> • Colonoscopy every 10 years • Flexible sigmoidoscopy every 5 years • Fecal occult blood test annually <p>Those with a family history (first-degree relative) of colorectal cancer or adenomatous polyps: Begin screening at age 40 or 10 years before the youngest case in immediate family. Colonoscopy every 5 years. Consider stopping screening at age 75. Use individual consideration between ages 75 and 85. Screening is not recommended for individuals older than 85.</p>
Counseling for breast cancer chemoprevention Chemoprevention of breast cancer	Counseling for women at high risk for breast cancer who might benefit from chemoprevention. Discuss benefits and harms of chemoprevention.
Counseling related to BRCA screening	Women at high risk.
Depression screening	All adults, every year during physical exam.
Diabetes screening (Type 2)	Fasting plasma glucose test every 3 years in adults with ongoing treated or untreated blood pressure greater than 135/80.
Diet counseling	Adults at high risk for chronic disease.
Height, weight and body mass index (BMI)	All adults during physical exam.
Hematocrit or hemoglobin screening	Pregnant women during their first prenatal visit.
Hepatitis B screening	Pregnant women during their first prenatal visit.
Iron-deficient anemia screening	On a routine basis for pregnant women.
Lipoprotein profile	A fasting lipoprotein profile (total cholesterol, LDL, HDL and triglycerides) once every 5 years.

Assessments and screenings for adults *(continued)*

Assessments, screenings and counseling	Recommendation
Medical history	All adults during annual physical exam.
Obesity screening and counseling	Screening for obesity as well as counseling and behavioral interventions.
Osteoporosis screening	A screening once every 2 years during physical exam for women 40 years and older. (Does not include bone density test.) A bone mineral density test every 2 years for post-menopausal women with risk factors beginning at age 50. If no risk factors, every 2 years beginning at 65.
Rh incompatibility screening	All pregnant women on first visit and follow-up testing for women at high risk.
Sexually transmitted infection (STI) prevention counseling	Adults at high risk.
Tobacco-use screening and counseling	At each visit. Includes cessation counseling and intervention for tobacco users. Expanded counseling for pregnant women.
Tuberculosis testing	Adults if at high risk of tuberculosis.

Drugs (prescription required)

Prescription	Recommendation
Oral fluoride supplements	Children 6 months of age and older without fluoride in their water source to prevent dental carie.
Folic acid supplements	Women of childbearing age, 0.4 to 0.8 mg of folic acid.
Iron supplements	Children ages 6 and 12 months at risk for iron-deficiency.
Low-dose aspirin therapy for the prevention of cardiovascular disease	Men between ages 45 and 79, women between ages 55 and 79 years and others with risk factors for heart disease. Consult your doctor before beginning aspirin therapy.

The Preventive Health Care Guidelines were developed and approved by Priority Health network physicians.

For physician use only: Specific EPSDT requirements may vary from the guidelines.

Please refer to the online Provider Manual to review the EPSDT periodicity chart for the mandated health screening program for Medicaid recipients younger than age 21.

References:

American Academy of Family Physicians

American Academy of Pediatrics

American Cancer Society

American College of Obstetricians and Gynecologists

American College of Physicians

American Medical Association

National Cancer Institute

U.S. Preventive Services Task Force, U.S. Public Health Service

Go to www.ahrq.gov/clinic/prevenix.htm for a complete list of evidence-based preventive services and risk factors from USPSTF.



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