

# PREVENTIVE CARE SERVICES

Detailed descriptions



How often and what kind of preventive care services you need depends upon your age, gender, health, and family history. Not all items on this list are covered benefits for all products or groups with Blue Cross or Blue Plus. Coverage for certain items and services may only be provided for plan and policy years after a certain date. Pharmacy coverage may differ for members with pharmacy benefit managers other than Prime Therapeutics. This list may not represent all possible tests or benefits, and **inclusion of a service or item on this list does not guarantee coverage**. Check your health plan benefits or call the number on the back of your member ID card for details on coverage. Additional requirements may apply. Tests ordered during a preventive visit that are not considered preventive care may be subject to deductibles, copays and/or coinsurance. Additionally, treatment or tests for an existing condition or illness are not preventive care and are subject to deductibles, copays and/or coinsurance. Make sure to review all tests with your healthcare provider for medical necessity.

CATEGORY	DESCRIPTION
<b>GENERAL PREVENTIVE CARE</b>	
Preventive medical exams and counseling	<p>Preventive physical/medical exam – age and gender appropriate medical history and physical exam, counseling or anticipatory guidance and risk-factor interventions.</p> <p>May include the following benefits (not an all-inclusive or restrictive list):</p> <ul style="list-style-type: none"> <li>• Blood pressure measurement</li> <li>• Skin cancer counseling to reduce ultraviolet (UV) ray exposure</li> <li>• Skin exam – for melanomas, sores, lesions</li> <li>• Aspirin use and counseling for certain adults aged 50-59 years with an increased risk for cardiovascular disease, based on risk assessment.</li> <li>• Prostate cancer digital rectal exam, depending on risk assessment according to the healthcare provider.</li> <li>• Domestic violence screening and counseling</li> <li>• Height, weight, body mass index (BMI)</li> </ul>
<b>CARDIOVASCULAR, METABOLIC SCREENING TESTS, AND CHRONIC CARE TESTS/DEVICES (CERTAIN MEN AND WOMEN)</b>	
Abdominal aortic aneurysm (AAA) ultrasound	Ultrasound screening, depending on age and risk assessment
Cholesterol (lipid) profile	Cholesterol, High-density lipoprotein (HDL) and Low-density lipoprotein (LDL) testing for individuals diagnosed with heart disease, depending on age and risk assessment.
Diabetes screening test	Blood glucose, glucometer for individuals diagnosed with diabetes, hemoglobin A1C, and retinopathy screening tests

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CATEGORY	DESCRIPTION
<b>CARDIOVASCULAR, METABOLIC SCREENING TESTS, AND CHRONIC CARE TESTS/DEVICES (CERTAIN MEN AND WOMEN) (continued)</b>	
Asthma management	Peak flow testing (peak flow meter)
Liver disease and/or bleeding disorder management	International normalized ratio (INR) testing
<b>COUNSELING AND CLINICAL ASSESSMENT OR SCREENING</b>	
Alcohol, drug and tobacco misuse	<p>May include:</p> <ul style="list-style-type: none"> <li>• Screening and counseling to reduce alcohol use</li> <li>• Drug use assessment</li> <li>• Screening and counseling to prevent tobacco use and tobacco-caused disease <ul style="list-style-type: none"> <li>○ Tobacco cessation counseling sessions</li> <li>○ FDA-approved tobacco cessation medications, when prescribed and provided in-network</li> </ul> </li> </ul>
Blood infection	Hepatitis B & C virus (HBV and HCV) screening
Depression	Screening for depression
Intimate Partner Violence	<p>May include:</p> <ul style="list-style-type: none"> <li>• Counseling and screening for interpersonal and intimate partner violence</li> </ul>
Nutrition, healthy weight, and physical activity	<p>May include:</p> <ul style="list-style-type: none"> <li>• Behavioral counseling in primary care to promote a healthy diet</li> <li>• Nutrition counseling</li> <li>• Screening and counseling for obesity</li> <li>• Falls prevention counseling for older adults</li> </ul>
Lung infection	Tuberculosis (TB) screening
Pre-Exposure Prophylaxis (PrEP) and Post Exposure Prophylaxis (PEP)	Counseling, services and testing
Sexually transmitted infections (STI), risk reduction counseling and screening	<p>May include:</p> <ul style="list-style-type: none"> <li>• Human immunodeficiency virus (HIV)</li> <li>• Chlamydia</li> <li>• Gonorrhea</li> <li>• Syphilis</li> </ul>
Vision* and hearing	<p>Vision screening – glaucoma, acuity, refraction</p> <p>Hearing screening – screening test, audiometry and pure tone</p>

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\*Note - The preventive vision benefit only applies for employer-sponsored health plans. There is no coverage for adult routine eye exams in non-grandfathered individual health plans.

CATEGORY	DESCRIPTION
<b>IMMUNIZATIONS</b> For details on doses, recommended ages, and recommended populations, see prevention guidelines at <a href="https://www.cdc.gov/vaccines/schedules">cdc.gov/vaccines/schedules</a> . Listed below are the most commonly utilized immunizations – list may not be all inclusive	
COVID-19 vaccines Tetanus, diphtheria, pertussis, poliovirus vaccines Influenza vaccines Varicella (chickenpox) vaccines Hepatitis A vaccines Hepatitis B vaccines Human papillomavirus (HPV) vaccines Measles, mumps, rubella (MMR) vaccines Pneumonia vaccines Meningitis vaccines Zoster (herpes shingles) vaccines Rotavirus vaccines Respiratory Syncytial Virus (RSV) vaccines	May be offered singly or grouped
<b>CANCER SCREENING TESTS</b>	
Breast cancer screening	Ages 40-74, every 2 years. May start earlier and be performed more frequently and/or extend later depending upon risk. Discuss your risk with your doctor.
Colorectal cancer screening	Ages 45-75. May start younger if at risk. May include one or more of the following: <ul style="list-style-type: none"> <li>• Stool test for blood (once/year)</li> <li>• Air contrast barium enema</li> <li>• Sigmoidoscopy/Flexible – sigmoidoscopy</li> <li>• Proctosigmoidoscopy</li> <li>• Colonoscopy</li> <li>• Stool DNA</li> <li>• CT Colonography</li> <li>• Bowel preparations (pharmacy benefit)</li> </ul>

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Lung cancer screening	Ages 50 to 80 using low – dose computed tomography (LDCT), depending on smoking history, as determined by health care provider.
Prostate cancer screening	May include: <ul style="list-style-type: none"> <li>• Digital rectal exam (DRE) usually performed as part of preventive medical exam</li> <li>• Prostate-Specific Antigen (PSA) – when appropriate as determined by joint decision-making between the member and the physician based on individual risk</li> </ul>
<b>WOMEN'S HEALTH (ALSO SEE PREGNANCY-RELATED)</b>	
Preventive gynecological exam	Preventive physical/medical exam – age-appropriate medical history and physical exam, counseling or anticipatory guidance and risk-factor interventions. May include evaluation of breasts and abdomen as well as pelvic exam.
Well-woman visits	Ages 12 to 65
Contraceptive methods and counseling	Counseling for contraception and specific FDA-approved contraceptives, including over the counter, when prescribed and provided in-network. Religiously exempt groups and certain plans may exclude this benefit.
Contraceptive management	Digital application for contraceptive management.
Counseling for BRCA and BRCA testing	Genetic counseling for women at increased risk for breast and ovarian cancer. BRCA lab tests BRCA lab tests subject to medical necessity criteria in Blue Cross medical policy “Genetic Testing for Hereditary Breast and/or Ovarian Cancer Syndrome (VI-16)”

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Counseling regarding and use of medication to reduce risk of breast cancer	For women at elevated risk, may be part of "Well-Woman visit" Generic Tamoxifen and raloxifene with a prescription when medically necessary and provided in-network.
<b>CATEGORY</b>	<b>DESCRIPTION</b>
Osteoporosis screening	Bone density measurement (once every two years)
<b>WOMEN'S HEALTH (ALSO SEE PREGNANCY-RELATED) (continued)</b>	
Breast cancer screening	Mammogram, two dimensional (2D or three dimensional (3D)), unilateral or bilateral
<b>PREGNANCY-RELATED</b>	
Breastfeeding support, supplies and counseling	May include: <ul style="list-style-type: none"> <li>• Primary care interventions to promote breastfeeding</li> <li>• Breastfeeding support supplies and counseling, including coverage of purchase of a manual or electric breast pump</li> </ul>
Routine prenatal tests	Such as: <ul style="list-style-type: none"> <li>• Gestational diabetes mellitus screening</li> <li>• Presence of bacteria in the urine</li> <li>• Hepatitis B</li> <li>• Iron-deficiency anemia</li> <li>• Screening for Rh incompatibility</li> </ul>
Alcohol, drug and tobacco misuse assessment and counseling, preventive medicine counseling and/or risk factor reduction interventions	May include: <ul style="list-style-type: none"> <li>• Screening and counseling to reduce alcohol misuse</li> <li>• Drug use assessment</li> <li>• Screening and counseling to prevent tobacco use and tobacco-caused disease <ul style="list-style-type: none"> <li>○ Tobacco counseling during pregnancy</li> </ul> </li> </ul>

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	<ul style="list-style-type: none"> <li>○ FDA-approved tobacco cessation medications, when prescribed and provided in-network</li> <li>● Preventive medicine counseling and/or risk factor reduction interventions</li> </ul>
CATEGORY	DESCRIPTION
Sexually transmitted infections (STI), risk reduction and screening	<p>Such as:</p> <ul style="list-style-type: none"> <li>○ Chlamydia infection screening</li> <li>○ Gonorrhea screening</li> <li>○ Hepatitis B screening</li> <li>○ Hepatitis C screening for high-risk individuals</li> <li>○ HIV (human immunodeficiency virus) screening</li> <li>○ Syphilis screening</li> </ul>
PREGNANCY RELATED (continued)	
Counseling for folic acid supplementation	For women planning pregnancy, may be part of "Well-Woman visit" Folic acid supplements for women with a prescription when provided in-network
CHILDREN AND ADOLESCENTS	
Preventive medical exam for children and adolescents (Bright Futures)	<p>Preventive physical/medical exam – age and gender appropriate medical history and physical exam, counseling or anticipatory guidance and risk-factor interventions.</p> <p>May include the following benefits (not an all-inclusive or restrictive list):</p> <ul style="list-style-type: none"> <li>● Blood pressure screening</li> <li>● Skin cancer counseling to reduce ultraviolet (UV) ray exposure</li> <li>● Skin exam – for melanomas, sores, lesions</li> <li>● Iron supplementation recommendation for children at increased risk for iron-deficiency anemia <ul style="list-style-type: none"> <li>○ Iron supplements for children ages 6 – 12 months</li> </ul> </li> <li>● Sickle cell screening</li> <li>● Family violence screening and counseling</li> <li>● Height, weight, body mass index (BMI)</li> <li>● Safety and injury prevention</li> <li>● Assessment of risk of lead exposure</li> </ul>
Depression screening	Screening for depression

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Nutrition, healthy weight and physical activity	<p>May include:</p> <ul style="list-style-type: none"> <li>• Behavioral counseling in primary care to promote a healthy diet</li> <li>• Nutrition counseling</li> <li>• Screening and counseling for obesity</li> </ul>
<b>CATEGORY</b>	<b>DESCRIPTION</b>
Vision and hearing	<ul style="list-style-type: none"> <li>• Vision screening – glaucoma, acuity, refraction</li> <li>• Hearing screening – screening test, audiometry and pure tone</li> </ul>
Behavioral health assessment	<p>Includes:</p> <ul style="list-style-type: none"> <li>• Alcohol, drugs and tobacco</li> <li>• Intellectual and mental disorders</li> <li>• Depression</li> <li>• Behavioral Health Assessment</li> </ul>
<b>CHILDREN AND ADOLESCENTS (continued)</b>	
Tooth decay and cavity prevention	<ul style="list-style-type: none"> <li>• Fluoride supplements for children whose water supply lacks fluoride, ages 6 months to 6 years old with a prescription.</li> <li>• Topical application of fluoride varnish birth through 6 years old</li> </ul>
Tuberculosis testing	Testing for tuberculosis (TB) for children

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