



Preventive Care Services Covered With No Cost to the Member

Your group health plan covers certain preventive services as a benefit of membership, at no cost to the member when they use a provider in your plan's network. There is no copay, deductible or coinsurance, even if the individual or family deductible or out-of-pocket maximum has not been met.

Covered Preventive Care Services¹

Depending on the particular health plan, coverage may be provided for the preventive services listed in this guide, at no cost to the member when seeing a provider participating in a health plan's provider network. This list may not include all of a particular plan's covered preventive services. BCBSTX members can call Customer Service at the number on their member ID card for details on how these benefits apply to their coverage and for the most up-to-date list of covered preventive services, including those paid without any cost-sharing.



Children and Adolescents

Children and Adolescents Well-child exam

Examples of services included as part of an annual well-child exam include history and physical exam, and measurements of height, weight and body mass index (BMI).

Immunizations

Diphtheria, Tetanus, Pertussis, Whooping Cough
Haemophilus Influenzae Type B
Hepatitis A
Hepatitis B
Human Papillomavirus (HPV)
Influenza (Flu)
Measles, Mumps, Rubella
Meningococcal
Pneumococcal
Inactivated Poliovirus
Rotavirus
Varicella (Chickenpox)

Learn more on recommendations of children and adolescents immunization schedule:

<http://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>

Screening tests

- Autism
- Cervical dysplasia screening
- Depression screening
- Dyslipidemia screening (for children at higher risk)
- Hematocrit or hemoglobin screening
- HIV screening
- Lead screening
- Obesity screening and counseling
- Screening for hearing loss, hypothyroidism, sickle cell disease and phenylketonuria (PKU) in newborns
- Screening for sexually transmitted infections (STIs)
- Skin cancer behavioral counseling for young adults
- Tuberculin testing
- Visual acuity screening

Preventive treatments

- Dental caries prevention fluoride varnish and oral fluoride supplementation
- Gonorrhea preventive medication for eyes of all newborns





Adults

Adults Preventive exam

Examples of services included as part of an annual preventive exam include history and physical exam, measurements of height, weight and body mass index (BMI).

Immunizations

Hepatitis A
Hepatitis B
Haemophilus Influenzae Type B (Hib)
Human Papillomavirus (HPV)
Influenza (Flu)
Measles, Mumps, Rubella
Meningococcal
Pneumococcal
Tetanus, Diphtheria, Pertussis
Varicella (Chickenpox)
Zoster

Learn more on recommendations of adults immunization schedule:
<http://www.cdc.gov/vaccines/schedules/hcp/adult.html>

Screening tests

- Abdominal aortic aneurysm screening
- Blood pressure screening
- Cholesterol screening
- Colorectal cancer screenings
- Depression screening
- Diabetes screening for adults with high blood pressure
- Hepatitis B screening
- Hepatitis C screening
- HIV screening and counseling
- Lung cancer screening
- Obesity screening
- Sexually transmitted infection (STI) screenings (chlamydia, gonorrhea, syphilis)

Health Counseling

- Alcohol misuse screening and counseling
- Falls prevention vitamin D supplementation
- Healthy diet counseling
- Obesity counseling
- Prevention of sexually transmitted infections (STIs)
- Sexually transmitted infections counseling
- Skin cancer behavioral counseling for young adults
- Tobacco use cessation (Includes prescription – for one or more products within the categories approved by the FDA for use in smoking cessation)
- Use of aspirin to prevent cardiovascular disease



Women Only

- Annual well woman visit
- Breast cancer prevention medication
- Breast cancer screening mammography
- Cervical cancer screening including pap smear
- Counseling related to chemoprevention of breast cancer
- Genetic counseling and evaluation for BRCA testing where family history is associated with an increased risk
- Human papillomavirus (HPV) DNA test
- Intimate partner violence counseling and screening
- Osteoporosis screening



Contraception²

The following contraceptive items and services are covered without cost-sharing when provided by a health care provider in a health plan's network.

- One or more prescribed products within each of the categories approved by the FDA for use as a method of contraception
- FDA-approved contraceptives available over the counter (foam, sponge, female condoms), when prescribed by a physician
- The morning after pill
- Medical devices such as IUD, diaphragm, cervical cap and contraceptive implants
- Female sterilization, including tubal ligation

Specifically for Pregnant Women

- Alcohol misuse screening and counseling
- Anemia screening
- Bacteriuria screening
- Breastfeeding support, supplied and counseling
- Folic acid supplementation
- Gestational diabetes screening
- Hepatitis B screening
- HIV screening
- Rh(D) incompatibility screening
- Screenings for sexually transmitted infections (STIs) including chlamydia, gonorrhea, and syphilis
- Tobacco use and cessation counseling



¹ Non-grandfathered health plans are required by the Affordable Care Act to provide coverage for preventive care services without cost-sharing only when the member uses a network provider. This includes preventive care services as follows:

- Evidence-based items/services rated A or B in the current recommendations of the U.S. Preventive Services Task Force
- Routine immunizations for children, adolescents and adults recommended by the Advisory Committee on Immunization Practices of the Centers for Disease control and prevention
- Evidence-informed preventive care and screenings for infants, children, and adolescents in the comprehensive guidelines of the Health Resources and Services Administrations
- Evidence-based preventive care and screenings for women described in the comprehensive guidelines of the Health Resources and Services Administration

² Certain group health plans established or maintained by organizations that qualify as religious employers may be exempt. These services may be covered under a plan's Pharmacy benefits.

The fact that a particular medical service is listed in this document is not a guarantee that benefits are available for such service. The member is instructed to refer to their health benefits document to determine what benefits are available for the particular medical service.