

# Preventive Services

Good news! All of your medical insurance options cover the services listed here at no cost as part of preventive care, when provided in-network. This includes routine screenings and checkups. It also includes counseling you get to prevent illness, disease or other health problems.

Many of these services are covered as part of physical exams. These include regular checkups, and routine gynecological and well-child exams. You won't have to pay out of pocket for these preventive visits, when provided in network.

But these services are generally not preventive if you get them as part of a visit to diagnose, monitor or treat an illness or injury. Then copays, coinsurance and deductibles may apply. Be sure to talk with your doctor about which services are right for your age, gender and health status.

## Covered Preventive Services for Adults Generally Include:

### Screenings for:

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Blood pressure
- Cholesterol (for adults of certain ages or at higher risk)
- Colorectal cancer (for adults over 50)
- Depression
- Type 2 diabetes (for adults with high blood pressure)
- Human immunodeficiency virus (HIV)
- Obesity
- Tobacco use
- Lung cancer (for adults ages 55 and over with a history of smoking)
- Syphilis (for all adults at higher risk)

### Medication and Supplements:

- Aspirin for men and women ages 45 and older with certain cardiovascular risk factors
- Vitamin D supplements for adults ages 65 and older with certain conditions
- Tobacco- cessation medications approved by the U.S Food and Drug Administration (FDA), including over-the-counter medications when prescribed by a health care provider and filled at a participating pharmacy

### Counseling for:

- Alcohol misuse
- Diet (for adults with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease)
- Obesity
- Sexually transmitted infection (STI) prevention (for adults at higher risk)
- Tobacco use ( including programs to help you stop using tobacco)

### Immunizations:

- Diphtheria pertussis, tetanus (DPT)
- Hepatitis A and B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chickenpox)

Doses, recommended ages and recommended populations vary.

## Covered Preventive Services for Women

### Screenings and Counseling for:

- BRCA (counseling and genetic testing for women at high risk with no personal history of breast and/or ovarian cancer)
- Breast cancer chemoprevention ( for women at higher risk)
- Breast cancer (mammography every 1 to 2 years for women over 40)
- Cervical cancer (for sexually active women)
- Chlamydia infection (for younger women and other women at higher risk)
- Gonorrhea (for all women at higher risk)
- Interpersonal or domestic violence
- Osteoporosis (for women over age 60 depending on risk factors)

### Medication and Supplements:

- Folic acid supplements (for women of child bearing ages)
- Risk-reducing medications such as tamoxifen and raloxifene, for women ages 35 and older at increased risk for breast cancer

### Contraceptive Products and Services:

- Prescribed FDA- approved female over- the- counter or generic contraceptives \* when filled at an in-network pharmacy
- Two visits a year for patient education and counseling on contraceptives are also covered under your Aetna medical plan

## Covered Preventive Services for Pregnant Women

- Routine prenatal visits (you pay your normal cost share for delivery, postpartum care, ultrasounds. Or other maternity procedures, specialists visits and certain lab tests)
- Anemia screenings
- Diabetes screenings
- Bacteriuria urinary tract or other infection screenings
- Rh incompatibility screening, with follow up testing for women at higher risk
- Hepatitis B counseling on tobacco use
- Expanded counseling on tobacco use
- Breastfeeding interventions to support and promote breastfeeding after delivery, including up to six visits with a lactation consultant

## Covered Preventive Supplies for Pregnant Women

- Certain standard electric breastfeeding pumps (non-hospital grade) anytime during pregnancy or while you are breastfeeding, once every three years
- Manual breast pump anytime during pregnancy or after delivery for the duration of breastfeeding
- Breast pump supplies, if you get pregnant again before you are eligible for a new pump

For more information go to [aetna.com](http://aetna.com) and search for “breast pumps.” Or call Member Services for details on how to use this benefit.

## Covered Preventive for Children

### Screenings and Assessments for:

- Alcohol and drug use (for adolescents)
- Autism (for children at 18 and 24 months)
- Behavioral issues
- Cervical dysplasia (for sexually active females)
- Congenital hypothyroidism (for newborns)
- Developmental screening (for children under age 3, and surveillance throughout childhood)
- Hearing (for all newborns)
- Height, Weight and body mass index assessments
- Lipid disorders (dyslipidemia screening for children at higher risk)
- Hematocrit or hemoglobin
- Hemoglobinopathies or sickle cell (for newborns)
- Human immunodeficiency virus (HIV) (for adolescents at higher risk)
- Lead (for children at risk for exposure) medical history
- Medical History
- Obesity
- Oral health (risk assessment for young children)
- Phenylketonuria (PKU) (for newborns)
- Tuberculin testing (for children at higher risk of tuberculosis)

### Medication and Supplements:

- Gonorrhea preventive medication for the eyes of all newborns
- Iron supplements (for children ages 6-12 months at risk of anemia)
- Oral fluoride for children 6 months through 5 years of age (prescription for children supplements without fluoride in their water source).

### Counseling for:

- Obesity
- STI prevention (for adolescents at higher risk)

### Immunizations:

- From birth to age 18 –doses, recommended ages and recommended populations vary.

- DPT
- Haemophilus influenzae type B
- Hepatitis A and B
- HPV
- Inactivated poliovirus
- Influenza
- MMR
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Rotavirus
- Varicella (chickenpox)

From birth to age 18 — doses, recommended ages and recommended populations vary.

## Exclusions and Limitations

These plans do not cover all health care expenses and include inclusions and limitations. Members should refer to their plans documents to determine which health care services are covered and to what extent. The following is a partial list of supplies and services that are generally not covered. However, your plan documents may contain exceptions to this list based on plan design or rider(s) purchased. All medical and hospital services not specifically covered in, or which are limited or excluded by, your plan documents, including costs of services before coverage begins and after coverage terminates.

- Cosmetic dentistry
- Custodial care
- Dental care and dental X-rays
- Donner egg retrieval
- Durable medical equipment
- Experimental and investigational procedures (except for coverage for medically necessary routine patient care costs for members participating in a cancer clinical trial)
- Hearing aids
- Home births
- Immunizations for travel or work
- Implantable drugs and certain injectable drugs including injectable infertility drugs
- Infertility services including, but not limited to, artificial insemination and advanced reproductive technologies such as in vitro fertilization (IVF), zygote intrafallopian transfer (ZIFT), gamete intrafallopian transfer (GIFT), intracytoplasmic sperm injection (ICSI), and other related services unless specifically listed as covered in your plan documents
- Non-medically necessary services or supplies
- Orthotics except diabetic orthotics
- Outpatient prescription drugs (except for treatment of diabetes), unless covered by a prescription plan rider and over-the-counter medications (except as provided in a hospital) and supplies
- Radial keratotomy or related procedures
- Reversal of sterilizations
- Services for the treatment of sexual dysfunction or inadequacies, including therapy, supplies, or counseling
- Special-duty nursing
- Therapy or rehabilitation other than what is listed as covered in the plan documents
- Weight - control services including surgical procedures, medical treatments, weight-control/ loss programs, dietary regimens and supplements, appetite suppressants and other medications. Food or food equipment, and other services and supplies that are primarily intended to control weight, or treat obesity, including morbid obesity, or for the purpose of weight reduction, regardless of the existence of comorbid conditions