



Using your preventive benefits

YOUR PREMIERA BLUE CROSS PLAN PAYS IN-NETWORK PREVENTIVE SERVICES IN FULL

You'll get the most value from these benefits by choosing a doctor in your plan's network. Getting timely preventive care is one way to detect potential health issues before they become serious and possibly expensive to treat.

So take advantage by following these simple steps:

- 1 Schedule your annual exam and vaccinations with your doctor right away!
- 2 When you make your appointment, be sure to tell the scheduler that you want a preventive exam.
- 3 Bring this flyer with you to show your doctor what's considered preventive and covered in full under your medical plan. Talk with your doctor about preventive services that are right for you.

Keep in mind

During your visit, your doctor may find a problem that needs more screening or tests to pinpoint the issue. Also, if you manage an ongoing health issue, your doctor may run further tests. Screenings and tests that diagnose or monitor your condition are not preventive services and are subject to your annual plan deductible and coinsurance. Recommended age and frequency of preventive services varies.

If you have any questions about your preventive coverage, call the customer service number on the back of your member ID card.

For more specific information about your coverage and guidelines, see the back of this brochure.

PREMERA | 

BLUE CROSS

An Independent Licensee of the Blue Cross Blue Shield Association

ADULTS 18 AND OLDER

Services, screenings, and tests

- **Wellness exams** for ages 18 and older; visits for routine wellness or physical exams
- **Abdominal aortic aneurysm screening** for men (65 to 74) who have ever smoked; one-time screening
- **Alcoholism screening and counseling**
- **Blood pressure screening**
- **Breast cancer screening:** screening mammography
- **Cholesterol test** for adults of specific ages or those at higher risk
- **Colorectal cancer screenings** starting at age 50 through age 75; sooner than age 50 for those at higher risk of colon cancer. Colorectal screening options include:
 - **Home tests:** Fecal occult blood (FOBT), fecal immunochemical (FIT) and stool DNA (Cologuard*)
 - **Doctor's office:** Sigmoidoscopy
 - **Outpatient hospital, ambulatory surgical center:** Colonoscopy (If your doctor recommends a screening colonoscopy, costs for related services such as pre-colonoscopy consultation, anesthesia your doctor considers medically appropriate for you, removal of polyps, and pathology are included.)
- **Depression screening**
- **Diabetes (Type 2) screening**
- **Fall prevention** for ages 65 and older
- **Healthy eating assessment and dietary counseling**
- **Hepatitis B screening** for those at higher risk
- **Hepatitis C screening** for those at higher risk
- **HIV (human immunodeficiency virus) infection screening** for those at higher risk
- **Latent tuberculosis infection screening** for those at higher risk
- **Lung cancer screening** for ages 55 to 80 at higher risk; prior authorization required; please contact customer service
- **Nicotine dependency screening and counseling** for quitting smoking or chewing tobacco
- **Obesity screening and counseling for weight loss**
- **Prostate cancer screening;** prostate-specific antigen (PSA) blood test
- **Sexually transmitted infection (STI) counseling** for those at higher risk
- **Syphilis testing** for those at higher risk

Medications and supplements

- **Aspirin** for pregnant women who are at high risk for preeclampsia or those at risk due to heart conditions between the ages of 45 and 79; over-the-counter, aspirin-only products (75–325 mg). **Requires a written prescription.**
- **Birth control** for birth control devices and family planning; generic, single-source brand, and multi-source brand oral contraceptives (including emergency contraception), cervical caps, patches, diaphragms, IUDs (intrauterine device), contraceptive implants, injectable contraception, and over-the-counter birth control (for example, female condoms, sponges). **Requires a written prescription.** Please see benefit booklet for additional coverage detail.
- **Breast cancer preventive medications** for those at higher risk — raloxifene, Soltamox, and tamoxifen
- **Folic acid** for women who are pregnant or are considering pregnancy; over-the-counter (0.4–0.8 mg). **Requires a written prescription.**
- **Pre-colonoscopy cleansing preparations** for those between the ages of 50 and 75; generic or single-source brands. **Requires a written prescription.** Fill limit of 2 every 365 days. (Over-the-counter drugs are not covered as a preventive benefit.)
- **Statins** for prevention of cardiovascular diseases; generic low- to moderate-dose statins for males and females between ages of 40 and 75.
- **Tobacco cessation** over-the-counter, generic patches, lozenges, and gum; prescription only for Bupropion (generic Zyban), Chantix, NRT (nicotine replacement therapy) nasal spray, or NRT inhaler. **Requires a written prescription.**

*Cologuard services may be subject to additional out-of-pocket expense.

ADULTS 18 AND OLDER (CONTINUED)

Reproductive and women's health

- **Birth control, contraception, and family planning:** visits for birth control devices and family planning; generic, single-source brand, and multi-source brand oral contraceptives (including emergency contraception), cervical caps, patches, diaphragms, insertion or removal of IUD (intrauterine device), contraceptive implants, injectable contraception, and over-the-counter birth control (for example: female condoms, sponges). **Requires a written prescription.** Please see benefit booklet for additional coverage detail.
- **Bone density (osteoporosis) screening**
- **Breast and ovarian cancer (BRCA) genetic counseling and testing:** prior authorization for testing required, please contact customer service
- **Breast cancer (chemoprevention) counseling** for women at higher risk
- **Breast cancer preventive medications** for those at higher risk – raloxifene, Soltamox, and tamoxifen
- **Breast cancer screening:** screening mammography
- **Cervical cancer screening**
 - Ages 21 to 65: Cytology (pap test) every 3 years
 - Ages 30 to 65 who want to lengthen the screening interval, Human papilloma virus (HPV) screening alone or in combination with cytology every 5 years
- **Chlamydia infection screening**
- **Domestic violence screening and counseling**
- **Gonorrhea screening** for those at higher risk
- **HPV (human papillomavirus) screening**
- **Sterilization** for women

Vaccinations

- **Chicken pox** (Varicella)
- **Flu** (Influenza)
- **Hepatitis A**
- **Hepatitis B**
- **HPV** (Human papillomavirus)
- **Meningitis** (Meningococcal)
- **MMR** (Measles, mumps, rubella)
- **Pneumonia** (Pneumococcal)
- **Shingles** (Herpes zoster)
- **Tdap** (Tetanus, diphtheria, pertussis)



Pregnancy

- **Anemia screening**
- **Bacteriuria urinary tract infection screening**
- **Breast-feeding interventions** to support and promote breast feeding before and after childbirth
- **Breast pumps** and supplies (single or double styles)
- **Folic acid** for women who are pregnant or are considering pregnancy; over-the-counter (0.4–0.8 mg). **Requires a written prescription.**
- **Gestational diabetes screening**
- **Hepatitis B infection screening**
- **Rh (antibody) incompatibility testing**
- **Syphilis screening**

CHILDREN AND TEENS

For children under age 18, routine exams, vaccinations, and screenings listed below are covered in full when received from a doctor within your plan's network.

Services, screenings, and tests

- **Well-baby exam** from birth to 3 years
- **Well-child exam** for ages 4 to 18
- **Anemia screening**
- **Annual alcohol and drug use screening**
- **Autism screening**
- **Behavioral issues**
- **Bilirubin screening** for newborns through the 28th day
- **BMI:** height, weight, and body mass
- **Cervical dysplasia** for sexually active females
- **Depression screening**
- **Developmental screening**
- **Hearing screening**
- **Hepatitis B screening** for those at higher risk
- **HIV (human immunodeficiency virus) screening** for those at risk
- **Hypothyroidism:** congenital; lack of thyroid secretions
- **Lead screening** for children at risk of exposure
- **Lipid disorders:** cholesterol and triglycerides
- **Metabolic screening for newborns (such as PKU);** phenylketonuria is an inherited metabolic deficiency
- **Obesity screening and counseling for weight loss**
- **Oral health risk assessment and fluoride varnish to primary teeth:** completed during routine physical exam
- **Sexually transmitted infection (STI) prevention counseling**
- **Sickle cell anemia and trait for newborns:** hemoglobinopathies
- **TB testing:** tuberculin
- **Vision screening**

Vaccinations

- **Chicken pox** (Varicella)
- **DTaP** (Diphtheria, tetanus, pertussis)
- **Flu** (Influenza)
- **HIB** (Haemophilus influenza type B)
- **Hepatitis A**
- **Hepatitis B**
- **HPV** (Human papillomavirus)
- **IPV** (Inactivated polio virus)
- **Meningitis** (Meningococcal)
- **MMR** (Measles, mumps, rubella)
- **Pneumonia** (Pneumococcal)
- **Rotavirus**

Medications and supplements

- **Fluoride** up to age 18. Generic only — 0.25 mg, 0.5 mg, 1 mg only; no combinations. **Requires a written prescription.**
- **Iron supplements** from birth to 12 months; over the counter, liquid form only

These services are based on guidelines required under state or federal law. The guidelines are changed from time to time and come from:

- Services that the U.S. Preventive Services Task Force has given an A or B rating
- Vaccinations that the Centers for Disease Control and Prevention recommends
- Screening and other care for women, babies, children, and teens that the Health Resources and Services Administration recommends
- Services that meet legal requirements in Washington state

This is a summary only. For more specific information, go to this government website:

[healthcare.gov/coverage/preventive-care-benefits/](https://www.healthcare.gov/coverage/preventive-care-benefits/)

See our preventive care medical policy at [premera.com/medicalpolicies/10.01.523.pdf](https://www.premera.com/medicalpolicies/10.01.523.pdf)

