



The Affordable Care Act (ACA) has added new requirements for insurance coverage of preventive care. Section 2713 of the ACA, and the interim final regulations (IFR) require health insurers offering large group, small group and individual health insurance to provide benefits and prohibit cost sharing for the preventive services and screenings listed below. Some exceptions may apply to grandfathered plans—please check with your plan administrator for details. The provision applies only when services are delivered by a network provider.

Covered Preventive Services for Adults

- ▶ **Abdominal Aortic Aneurysm**, one-time screening for men of specified ages who have smoked.
- ▶ **Advanced Care Planning** guide your doctor and your loved ones about the care you wish to receive.
- ▶ **Alcohol Misuse** screening and counseling.
- ▶ **Aspirin** use for men and women of certain ages. (Dean covers consultation with your physician regarding aspirin use. Aspirin must still be purchased as an over the counter medication.)
- ▶ **Blood Pressure** screening for all adults.
- ▶ **Cholesterol** screening for adults of certain ages or at higher risk.
- ▶ **Colorectal Cancer** screening for adults over 50.
- ▶ **Depression** screening for adults.
- ▶ **Type 2 Diabetes** screening for adults with high blood pressure.
- ▶ **Diet** counseling for adults at higher risk for chronic disease.
- ▶ **Falls Prevention** for adults 65 years and over, living in a community setting.
- ▶ **Hepatitis B** Screening for high-risk adults.
- ▶ **Hepatitis C** Screening for high-risk adults.
 - One-time screening for all adults born 1945–1965.
- ▶ **HIV** counseling and screening for all adults at higher risk.
- ▶ **Immunization Vaccines** for adults. Doses, recommended ages and recommended populations vary:
 - Haemophilus influenzae type b
 - Hepatitis A
 - Hepatitis B
 - Herpes Zoster (Shingles)
 - Shingrix for ages 50 and older
 - Zostavax for ages 60 and older
 - Human Papillomavirus
 - Influenza
 - Measles, Mumps, Rubella
 - Meningococcal
 - Pneumococcal
 - Tetanus, Diphtheria, Pertussis
 - Varicella (Chickenpox)
- ▶ **Lung Cancer Screening** for adults with a history of smoking.
- ▶ **Obesity** screening and counseling for all adults.
- ▶ **Sexually Transmitted Infection (STI)** prevention counseling for adults at higher risk.

- ▶ **Statin Prevention Medication** for adults 40 to 75 at high risk.
- ▶ **Tobacco Use** screening for all adults and for those who use tobacco products after enrollment in our Quit for Life® Program, which will include four counseling sessions per person (by phone or in person) and medications (two 90-day supply prescriptions).
- ▶ **Syphilis** screening for all adults at higher risk.
- ▶ **Skin Cancer** behavioral counseling for young adults and parents of young children.
- ▶ **Tuberculosis** screening for certain adults without symptoms at high risk.
- ▶ **One Annual Preventive Care Visit** per member for routine screenings and preventive services.

Covered Preventive Services for Women

(Including pregnant women)

- ▶ **Anemia** screening on a routine basis for pregnant women.
- ▶ **Bacteriuria** urinary tract infection or other screening for pregnant women.
- ▶ **BRCA** counseling about genetic testing for women at higher risk.
- ▶ **Breast Cancer Medications** for risk reduction of primary breast cancer in women who are at increased risk for breast cancer and low risk for adverse medication effects.
- ▶ **Breast Cancer Screening** Mammography and 3D Mammography also known as Breast Tomosynthesis every year for women over 40.
- ▶ **Breast Cancer Chemoprevention** counseling for women at higher risk.
- ▶ **Breastfeeding** support, supplies and counseling in conjunction with each birth of a child.
- ▶ **Cervical Cancer** screening for sexually active women.
- ▶ **Chlamydia Infection** screening for younger women and other women at higher risk.
- ▶ **Contraceptive** methods and counseling as prescribed.†
- ▶ **Domestic Violence** screening and counseling annually.
- ▶ **Folic Acid** supplements for women who may become pregnant.
- ▶ **Gestational Diabetes** screening in pregnant women between 24 and 28 weeks of pregnancy and at the first prenatal visit for those pregnant women identified to be at high risk for diabetes.
- ▶ **Gonorrhea** screening for all women at higher risk.



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- ▶ **Hepatitis B** screening for pregnant women at their first prenatal visit.
- ▶ **Human Immune-Deficiency Virus (HIV)** annual screening and counseling for all sexually active women.
- ▶ **Human Papillomavirus (HPV)** DNA testing in woman with normal cytology results every 3 years for women over 30.
- ▶ **Maternal Depression** screening for mothers of infants at 1, 2, 4, and 6-month visits.
- ▶ **Osteoporosis** screening for women over age 60 depending on risk factors.
- ▶ **Preeclampsia** prevention and screening for pregnant women with high blood pressure.
- ▶ **Rh Incompatibility** screening for all pregnant women and follow-up testing for women at higher risk.
- ▶ **Tobacco Use** screening and interventions for all women, and expanded counseling for pregnant tobacco users.
- ▶ **Sexually Transmitted Infection (STI)** screening and counseling for all sexually active women.
- ▶ **Syphilis** screening for all pregnant women or other women at increased risk.
- ▶ **Urinary Incontinence** screening for women yearly.
- ▶ **One Annual Well-Woman Preventive Care Visit** per member to obtain the recommended services that are age and developmentally appropriate. Female members may choose a provider in Internal Medicine, Family Medicine or Ob/Gyn for this visit, but any additional visits to these providers in a calendar year will be subject to cost sharing.
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- ▶ **Covered Preventive Services for Children**
- ▶ **Alcohol and Drug Use** assessments for adolescents.
- ▶ **Autism Spectrum** screening for children up to age 3.
- ▶ **Behavioral** assessments for children of all ages.
- ▶ **Bilirubin Concentration** screening for newborns.
- ▶ **Blood Pressure** screening for children.
- ▶ **Blood Screening** for newborns.
- ▶ **Cervical Dysplasia** screening for sexually active females.
- ▶ **Congenital Hypothyroidism** screening for newborns.
- ▶ **Depression** screening for adolescents.
- ▶ **Developmental** screening for children under age three, and surveillance throughout childhood.
- ▶ **Dyslipidemia** screening for children at higher risk of lipid disorders.
- ▶ **Fluoride Chemoprevention** supplements for children without fluoride in their water source.
- ▶ **Fluoride Varnish** for children up to age 5.
- ▶ **Gonorrhea** preventive medication for the eyes of all newborns.
- ▶ **Initial Hearing** screening for all newborns.
- ▶ **Height, Weight and Body Mass Index** measurements for children.
- ▶ **Hematocrit** or hemoglobin screening for all children.
- ▶ **Hemoglobinopathies** or sickle cell disease screening for newborns.
- ▶ **Hepatitis B** screening for high risk adolescents.
- ▶ **HIV** counseling and screening for adolescents at higher risk.
- ▶ **Hypothyroidism** screening for newborns.
- ▶ **Immunization Vaccines** for children from birth through age 17. Doses, recommended ages and recommended populations vary:
 - Diphtheria, Tetanus, Pertussis
 - Haemophilus influenzae type b
 - Hepatitis A
 - Hepatitis B
 - Human Papillomavirus
 - Inactivated Poliovirus
 - Influenza
 - Measles, Mumps, Rubella
 - Meningococcal
 - Pneumococcal
 - Rotavirus
 - Varicella
- ▶ **Iron** supplements for children ages six to 12 months at risk for anemia.
- ▶ **Lead** screening for children at risk of exposure.
- ▶ **Medical History** for all children throughout development.
- ▶ **Obesity** screening and counseling.
- ▶ **Oral Health** risk assessment for young children.
- ▶ **Phenylketonuria (PKU)** screening for this genetic disorder in newborns.
- ▶ **Sexually Transmitted Infection (STI)** prevention counseling and screening for adolescents at higher risk.
- ▶ **Skin Cancer** behavioral counseling for adolescents and children.
- ▶ **Tobacco use** screening for children and adolescents.
- ▶ **Tuberculin** testing for children at higher risk of tuberculosis.
- ▶ **Vision Screening** for all children. Please note: this service is only covered as preventive when it's done as part of a Well Baby Checkup. Any additional screenings or eye exam would have a diagnostic code and therefore is not considered preventive.
- ▶ **Well Baby/Child Checkups** for preventative care and services.

† Group health plans sponsored by certain religious employers and organizations, and group health insurance coverage in connection with such plans, may not be required to cover contraceptive services at this time. Please see HRSA guidelines available at [hrsa.gov/womensguidelines](https://www.hrsa.gov/womensguidelines) and related federal guidance. Please contact your plan administrator for details about your plan.