



Preventive Health Care Guidelines

No-cost preventive care to help you be your healthiest



Good health
starts with you.

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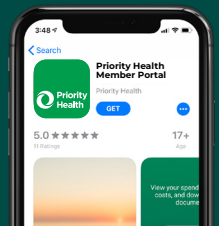
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Download the
Priority Health app
for **access to your
health information**
anytime, anywhere.



Finding and preventing health problems before they start.

Your health matters, and being in good health takes more than just receiving quality medical care when you need it. That's why Priority Health includes preventive health care services like well-child visits, flu shots and routine physical exams in your plan at no cost to you.

We help you manage preventive care with reminders such as letters, emails and even alerts in your Priority Health member account.

What are preventive health care services?

Preventive health care services help you avoid potential health problems, or find them early when they are most treatable, before you feel sick or have symptoms. We pay in full for the preventive care services listed in your plan benefits.

No-cost preventive care includes:

- ✓

Immunizations or vaccines like flu shots
- ✓

Annual physical exams
- ✓

Some lab tests
- ✓

Some prescriptions

	PREVENTIVE CARE	NON-PREVENTIVE (ALSO CALLED DIAGNOSTIC)
Reason for service	To prevent health problems. You may have no symptoms.	You have a symptom, or you're being checked because of a known health issue.
What you'll pay	\$0	Your deductible, copayments and coinsurance may apply.



Keep in mind

- You need to receive preventive care services from an in-network provider for us to pay for them in full.
- If you're feeling sick or having symptoms when you receive services, they're not considered preventive care, and you'll have to pay your share of the costs.
- Additional tests aren't preventive if a preventive checkup or screening finds a potential health problem and the doctor sends you for more tests. You'll need to pay your portion of the costs for these additional tests.

Here's an example:

You schedule your annual preventive checkup with your doctor. While you're there, the doctor does a routine exam, several preventive screenings and gives you a flu shot. We pay for all these services in full, and your portion of the cost is \$0.

However, the doctor hears something irregular while listening to your breathing and sends you to get a chest x-ray. Your provider will bill you for your share of the cost of the chest x-ray. The x-ray is a covered benefit, but you will share the costs of the x-ray with your health plan.

A medical service is non-preventive (also called diagnostic).

- If you have a chronic disease like diabetes, your doctor may monitor your condition with tests. Because the tests manage your condition, they are not considered preventive care, and you'll have to pay your portion of the cost.
- If you have a preventive screening and a health problem shows up, your doctor may order follow-up tests. In this case, the tests are non-preventive.
- If your doctor orders follow-up tests based on symptoms you're having, like a stomachache, these tests are non-preventive.

Talk to your doctor.

During your yearly visit, be sure to discuss the procedures and medications your doctor is recommending so that you understand what is preventive versus non-preventive.

Only services identified in this document are considered preventive and will be paid for in full by your health plan. If your provider indicates a service is preventive, refer to these guidelines to confirm your portion of the cost is \$0. If you have questions, call the Customer Service number on the back of your member ID card.

Preventing disease before it starts is critical to helping people live longer, healthier lives and keeping health care costs down. Preventive services can also help those with early stages of disease keep from getting sicker.

Source: Centers for Disease Control and Prevention (CDC). For more information about the CDC, visit [cdc.gov](https://www.cdc.gov).

Here are some common examples of preventive and non-preventive services:

SERVICE	PREVENTIVE (included at no cost)	NON-PREVENTIVE (you'll pay a portion of the cost)
Breast cancer screening	You have no symptoms, and you have a mammogram or digital breast tomosynthesis based only on your age or family history.	You're having a health problem like pain, or you feel a lump.
Colon cancer screening	Your doctor wants to screen for signs of colon cancer based on your age or family history. If a polyp is found and removed during your preventive colonoscopy, the colonoscopy and polyp removal are preventive. If the polyp is sent for lab testing, the testing is considered preventive.	You're having a health problem, like bleeding or irregularity.
Complete blood count (CBC)	Not a preventive service	Considered non-preventive because studies show there's no need for this test unless you have symptoms.
Diabetes screening	A blood glucose test is used to detect problems with your blood sugar, even though you have no symptoms.	You're diagnosed with diabetes, and your doctor checks your A1c.
Metabolic panel	Not a preventive service	Considered non-preventive because studies show that a metabolic panel isn't the best test for detecting or preventing illnesses.
Osteoporosis screening	Your doctor recommends a bone density test based on your age or family history.	You've had a health problem, or your doctor wants to determine the success of a treatment.
Prostate-specific antigen (PSA) test	Not a preventive service	Considered non-preventive because national guidelines do not recommend this test as it gives many false results. ¹
Urinalysis	Not a preventive service	Considered non-preventive because national guidelines say there's no need for this test unless you have symptoms.

¹Men ages 55–69 should have a conversation with their provider regarding prostate cancer screening. The test is not recommended for men over the age of 70. You may be responsible for a portion or all of the costs of the test.

Preventive care is included in most plans at no cost.

Most Priority Health plans include preventive care at no cost to our members. There are a few plans that do not include preventive care or have special guidelines:

- If you purchased a My**Priority** short-term plan, your plan does not include preventive care.
- If you have a grandfathered plan, which is typically an employer sponsored plan that hasn't changed since 2010, preventive care may be excluded, or there may be specific costs for certain services. Ask your employer if your plan is a "grandfathered plan" as defined by the Affordable Care Act.
- Some employers may exclude contraceptives from their health plans. Contact your employer or call Customer Service at the number on the back of your member ID card for more information.

Where can you look for your preventive care details?

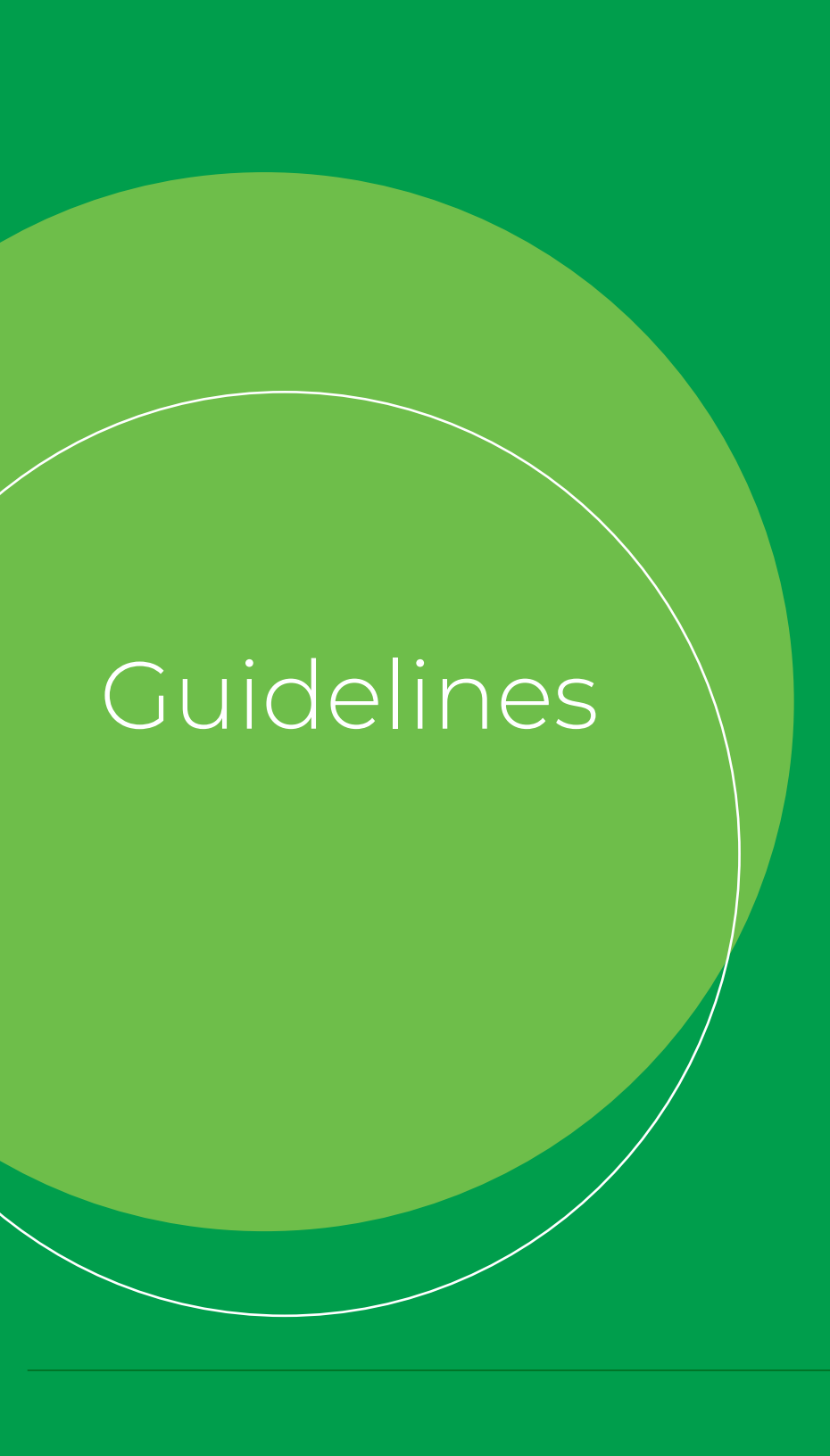
- Review your health plan documents in your member account for a full list of preventive care services. If you don't see your documents, contact your employer for a copy.
- Get your questions answered, or a copy of your guidelines, by calling our Customer Service team at the number on the back of your member ID card. You can also log in at **priorityhealth.com** to send us a message.
- Check your guidelines online throughout the year as they may change based on research and recommendations. You can see your most up-to-date list of preventive health care services by visiting **priorityhealth.com/preventive**.



Know your costs

Cost and coverage go hand in hand, which is why the Coverage Check tool in your member account is so useful. Coverage Check makes it easy to search for which prescriptions, procedures and in-network providers are covered under your plan and shows you a cost estimate so you can compare prices.

Simply type in a prescription name (e.g., Tresiba®), a type of procedure (e.g., MRI) or a provider's first or last name to see what's covered under your plan and how much you can expect to pay.



Guidelines

The preventive health care services listed in these pages are recommended for you and your family by the U.S. Preventive Services Task Force (USPSTF), Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices (ACIP), Health Resources and Services Administration and the latest medical research from organizations like the American Medical Association.



Preventive care for
Children 0–18

Immunizations

VACCINE	RECOMMENDATION
Chickenpox (varicella)	1 dose between 12–15 months old. Second dose between 4–6 years old. For kids 14 and older with no history of the vaccination or disease, 2 doses 4–8 weeks apart.
COVID-19	Primary doses and booster doses covered. Refer to CDC guidance to determine vaccine frequency and age eligibility for persons under 18.
Diphtheria, tetanus, whooping cough (pertussis)	1 dose of DTaP (Diphtheria, Tetanus, Pertussis) at 2, 4, 6 and 18 months old. 1 dose of Tdap (Tetanus, Diphtheria, Pertussis) between 11 and 12 years with a Td (Tetanus, Diphtheria) booster every 10 years after. Those older than 7 years and not previously immunized can get a single dose of Tdap.
Flu (influenza)	2 doses 4 weeks apart for healthy children between 6 months and 8 years the first time they get the vaccine. After age 2, children who've previously had the flu shot can receive 1 dose annually.
Haemophilus influenza type b	1 dose at 2, 4 and 6 months and once between 12–18 months old.
Hepatitis A	2 doses at least 6 months apart between 12–23 months old. For children not previously immunized, 2 doses can be given at least 6 months apart at your doctor's discretion.
Hepatitis B	1 dose to all newborns before leaving the hospital, a second dose between 1–2 months and a third dose between 6–18 months. May begin between 2–18 years old if not immunized as a baby.
HPV (human papillomavirus)	2 doses over a 24-week period starting at age 11. Your doctor may give the vaccine as early as age 9 if your child is at high risk.
Measles, mumps, rubella (MMR)	1 dose between 12–15 months and a second between 4–6 years. Can be given to older children if no history of vaccination, or the disease.
Meningitis (meningococcal)	1 dose between 11–12 years, with another dose at 16 years. If the first dose is done between 13–15 years, then give the second dose between 16–18 years. Doctors may give vaccine as early as age 2 if your child is at high risk.
Pneumonia (Pneumococcal)	1 dose at 2, 4 and 6 months and again at 12 to 15 months. Children over age 2 can get a single dose if not previously immunized. Children with an underlying medical condition can receive an additional dose. Children at high risk can be vaccinated after age 7.
Polio	1 dose at 2 and 4 months and between 6–18 months (3 doses total). Then 1 dose between 4–6 years old.
Respiratory syncytial virus (RSV)	1 dose monoclonal antibody for infants aged <8 months born during or entering their first RSV season and for infants and children aged 8–19 months who are at increased risk of severe RSV disease entering their second RSV season.
Rotavirus	Minimum age is 6 weeks. If using Rotarix, 2-dose series recommended at 2 and 4 months old. If using RotaTaq or unknown, default to a 3-dose series at 2, 4 and 6 months old.

Physical exams (well-child visits)

AGE	RECOMMENDATION
Newborn	1 visit 3–5 days after discharge
0–2 years	1 visit at 1, 2, 4, 6, 9, 12, 15, 18 and 24 months
3–6 years	1 visit at 30 months and 1 visit every year for ages 3–6
7–18 years	1 visit every year

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Alcohol and drug use assessment	Ages 11–18 during each visit. Counseling to those at risk.
Anticipatory guidelines as defined by Bright Futures	At your doctor's discretion for all children throughout their development
Anxiety screening	Children and adolescents aged 8–18 years
Autism screening	At 18 and 24 months
Blood pressure	Every year starting at age 3; earlier based on risk assessment.
Cavity prevention	Doctors should apply fluoride varnish to teeth for children up to age 5. (Not a dental benefit.)
Depression screening and behavioral assessments	At your doctor's discretion for children of all ages
Depression and suicide risk	Screening for major depressive disorder (MDD) in adolescents aged 12 to 18 years
Developmental screening	At 9, 12, 15 and 18 months and during well child exam annually thereafter
Dyslipidemia screening	At 9, 12, 15, 18, 24, 36, 48 etc months for developmental screening. Assess risk at 2, 4, 6, 8 and 10 years old, then every year through age 18. Routine lab testing is not recommended but may be done for children at high risk.
Gonorrhea preventive medication	Once at birth

Doctor visits and tests, *continued*

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Hearing loss screening	All newborns and at ages 3, 4, 5, 6, 8, 10, 12, 15 and 18 years
Height, weight and body mass percentile	Height and weight at each visit up to age 2. After age 2, body mass percentile.
Hematocrit or hemoglobin screening	Once at 12 months, once between ages 11–18 and once every year for menstruating adolescents
Hepatitis B screening	Adolescents at high risk
HIV screening	Start at age 15. Screening for children under 15, if they're at high risk. Risk assessment and prevention education beginning at age 13 and continuing as determined by risk.
Lead screening	At 12 and 24 months for children at high risk. Risk assessment for lead exposure between 6–12 months old, 24 months and between 2–6 years.
Medical history	At each well-child visit
Newborn screenings as identified by the U.S. Health Resources and Services Administration	Once at birth
Obesity screening, and physical activity and nutrition counseling	At your doctor's discretion starting at age 6
Oral health risk assessment	At 12, 18, 24 and 30 months old, and 3 and 6 years old
Sexually transmitted infection (STI) prevention, screening and counseling	At your doctor's discretion for all sexually active adolescents. Screening for syphilis infection in non-pregnant adolescents who are at increased risk for infection.
Skin cancer prevention counseling	Fair-skinned children and adolescents ages 6 months to 24 years old should receive counseling to minimize exposure to UV radiation
Tobacco-use screening and counseling	During each visit. Includes cessation interventions for tobacco users and expanded counseling for pregnant tobacco users.
Tuberculosis (TB) testing	At your doctor's discretion for children at high risk
Vision screening	At ages 3, 4, 5, 6, 8, 10, 12, 15 and 18 years

Drugs *Prescription required*

PRESCRIPTION	RECOMMENDATION
Iron supplements	Children ages 6–12 months at risk for iron deficiency. this is an AAP recommendation, see healthchildren.org .
Oral fluoride supplements	Children 6 months through age 5 without fluoride in their water source



Preventive care for

Adult men and women

Immunizations *Doses, ages and recommendations vary.*

VACCINE	RECOMMENDATION
Chickenpox (varicella)	2 doses 4 weeks apart for those with no history of the vaccination or disease
COVID-19	When available, will be covered in full in accordance with national guidelines. Refer to CDC guidance to determine vaccine frequency.
Flu (influenza)	1 dose every year
Haemophilus influenza type B	1 to 3 doses depending on indication
Hepatitis A	Depending on vaccine for those at risk
Hepatitis B	2, 3 or 4 doses depending on vaccine for those at risk
HPV (human papillomavirus)	2 or 3 doses depending on age at initial vaccination or medical condition
Measles, mumps, rubella (MMR)	1 dose if no evidence of immunity
Meningitis (meningococcal)	1–3 doses as indicated by vaccination history and medical conditions
Pneumonia (Pneumococcal)	Age 50; 0–2 doses based on age and medical conditions
Respiratory syncytial virus (RSV)	1 dose for adults age 60 years and older
Shingles (herpes zoster)	Age 50; up to 2 doses depending on age and medical conditions
Tetanus, diphtheria and whooping cough (pertussis)	1 dose with pertussis vaccine, followed by tetanus vaccine every 10 years. Pregnancy and certain medical conditions can modify the schedule.

Physical exams

AGE	RECOMMENDATION
19–21 years	Once every 2–3 years; annually if desired
22–64 years	Once every 1–3 years
65 and older	Once every year

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Abdominal aortic aneurysm screening	Once for men ages 65–75 with a history of smoking
Advance care planning	During physical exam. We recommend you choose someone to speak on your behalf. Tell them your health wishes and then document your wishes in an advance directive.
Alcohol misuse and unhealthy drug use screening and counseling	During physical exam
Anxiety screening	During physical exam
Blood pressure screening	During physical exam
Breast cancer screening	Women: Digital breast tomosynthesis (DBT) or mammogram included in plan once every 2 years for women ages 40–74. Begin at age 30 for those at high risk. Men and women: At doctor's discretion based on risk factors.
Cardiovascular disease counseling (CVD)	Healthy diet and physical activity counseling to prevent cardiovascular disease among adults with risk factors for CVD
Cholesterol test	A fasting test (total cholesterol, LDL, HDL and triglyceride) once every 5 years

Doctor visits and tests, *continued*

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Colorectal cancer screening	For those ages 45–75, one of the following screenings: • High-sensitivity guaiac fecal occult blood test (HSgFOBT) or fecal immunochemical test (FIT) every year • Stool DNA-FIT every 1 to 3 years • Computed tomography colonography every 5 years • Flexible sigmoidoscopy every 5 years • Flexible sigmoidoscopy every 10 years + FIT every year • Colonoscopy screening every 10 years
Depression screening	During physical exam
Diabetes Prevention Program	Adults at risk of diabetes (based on BMI and blood test or based on the CDC at-risk questionnaire) can join the Diabetes Prevention Program for education on diet, physical activity and weight loss. For more information, visit priorityhealth.com/prevent-diabetes .
Diabetes screening	For those with a sustained blood pressure greater than 135/80 with hypertension or hyperlipidemia, or for adults age 35–70 who are overweight or obese
Diet counseling	At your doctor's discretion, if you're at high risk for heart and diet-related chronic diseases
Fall prevention	Exercise interventions to prevent falls in community-dwelling adults 65 years or older who are at increased risk for falls
Height, weight and body mass index (BMI)	During physical exam
Hepatitis B screening	Adults at high risk
Hepatitis C screening	Adults at high risk and a one-time screening for adults ages 18–79
HIV screening	All adults up to age 65. Screen older adults if at high risk.

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Lung cancer screening	Annual screening for lung cancer with low-dose computed tomography (LDCT) in adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years. Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery.
Medical history	During physical exam
Obesity screening and counseling	All adults during physical exam
Preventive guidance for family and intimate partner violence, breast self-exam, menopause counseling, safety, falls and injury prevention	At doctor's discretion
Sexually transmitted infection (STI) counseling and screening	Annual screening and counseling for chlamydia, gonorrhea and syphilis for adults who are at high risk
Skin cancer prevention counseling	Fair-skinned adults up to 24 years old should receive counseling to minimize exposure to UV radiation
Tobacco-use screening and counseling	At each visit. Includes cessation counseling and interventions (see tobacco cessation products in the “Drugs” section). Expanded counseling for pregnant women.
Tuberculosis (TB) testing	At your doctor's discretion, if you're at high risk

Drugs *Prescription required*

PRESCRIPTION	RECOMMENDATION
Statin therapy to prevent heart disease	For adults ages 40–75 years with no history of cardiovascular disease (CVD) who have one or more CVD risk factors and a calculated 10-year CVD event of 10% or greater
Tobacco-cessation products	Nicotine replacement or tobacco-cessation products are covered for up to 3 months. Coverage is continued for an additional 3 months if you have successfully quit smoking (a maximum of 6 months per calendar year).
Pre-exposure prophylaxis (PrEP)	Pre-exposure prophylaxis (or PrEP) is taken to prevent getting HIV. PrEP can stop HIV from taking hold and spreading throughout your body. PrEP is available as an oral pill or an injection. Routine HIV testing is covered in full for adults taking PrEP for prevention of HIV. Speak with your provider to determine if it is right for you.





Preventive care for

Women 18+ and pregnant women

Part 1: Women 18 years and older

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Anxiety screening	Screening for anxiety in adolescent and adult women, including those who are pregnant or postpartum
BRCA risk assessment and genetic counseling/testing	Risk assessments for women with a family history of breast, ovarian, tubal or peritoneal cancer. Women who test positive should receive genetic counseling and, if indicated after counseling, BRCA testing. BRCA testing is covered once per lifetime.
Breast cancer counseling	At your doctor's discretion, for women at high risk of breast cancer who may benefit from chemoprevention
Cancer screening navigation services	Patient navigation services for breast cancer and cervical cancer screening. Contact the Customer Service number on the back of your ID card for help locating a screening location.
Contraceptive counseling and contraception methods	Screening, education, counseling and follow-up care (e.g., management, evaluation and changes, including the removal, continuation and discontinuation of contraceptives). See page 16 for FDA-approved contraceptives covered by your plan. Education in fertility awareness-based methods for women desiring an alternative method. Note: Some employers may exclude contraceptives from their health plans. To find out if your plan includes this service, please contact your employer or call Customer Service at the number listed on the back of your member ID card.
Domestic violence and intimate partner violence screening and counseling	Yearly
HIV counseling and screening	Screening at least once during their lifetime for all adult women, ages 15 and older. Earlier or additional screening should be based on risk. Re-screening annually or more often may be appropriate beginning at age 13 for adolescent and adult women with an increased risk of HIV infection. Risk assessment and prevention education for HIV infection as determined by risk.
Patient navigation services for breast and cervical cancer screening	For information about this benefit and assistance in finding a provider, call the Customer Service number on the back of your member ID card.

Doctor visits and tests, continued

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Obesity prevention	Counseling midlife women aged 40 to 60 years with normal or overweight body mass index (BMI) (18.5-29.9 kg/m ²) to maintain weight or limit weight gain to prevent obesity. Counseling may include individualized discussion of healthy eating and physical activity.
Osteoporosis screening	Women 65 and older. Younger women who are at high risk, such as post-menopausal women.
Pap and HPV tests (cervical cancer screening)	Cervical cytology (Pap test) every 3 years for women aged 21 to 29 years. For women aged 30 to 65 years, every 3 years with Pap test alone, every 5 years with HPV testing alone, or every 5 years with HPV testing in combination with Pap test. Not recommended for women younger than 21 years and women older than 65 years who have had adequate prior screening and are not otherwise at high risk for cervical cancer.
Sexually transmitted infection (STI) prevention counseling and screening	Screening for chlamydia in all sexually active women 24 years or younger and in women 25 years or older who are at increased risk for infection. Counseling to reduce the risk of STIs should be considered, as determined by clinical judgment, for women not identified as high risk.
Substance use screening and assessment	Yearly
Urinary incontinence screening	Yearly
Well-woman visits (physical exams)	Yearly

Drugs *Prescription required*

PRESCRIPTION	RECOMMENDATION
Breast cancer prevention medication	Risk-reducing medications for women 35 and older with an increased risk of breast cancer who have never been diagnosed with breast cancer
Folic acid supplements	Women who are or who could become pregnant 0.4 to 0.8 mg daily. 0.4 to 0.8 mg at your doctor's discretion

Part 1: Women 18 years and older

Contraceptives* *Prescription required*

TYPE	METHOD	BENEFIT LEVEL
Hormonal	• Oral contraceptives	The cost of generic contraceptive methods and the ring methods for women are paid for in full by your health plan. Effective 1/1/19, some high-cost generics may not be paid for in full when a lower-price alternative is available. See the approved drug list at priorityhealth.com/formulary for more information.
	• Injectable contraceptives	
	• Patch	
	• Ring	
Barrier	• Diaphragms	Deductible – The amount you pay each year before your health plan starts to pay for services listed as benefits of your plan.
	• Condoms	
	• Contraceptive sponge	
	• Cervical cap	
Implantable	• Spermicide	
	• IUDs	Copayment – The portion you pay at the time you receive a health care service or fill a prescription. Generic contraceptive methods and the ring methods for women are covered at 100% (no cost to you).
	• Implantable rod	
Emergency	• Ella®	Your deductible and/or prescription copayment applies for brand-name contraceptives when there is a generic available.
	• Next Choice®	
	• Next Choice® One Dose	
	• My Way™	
Permanent	Tubal ligation or salpingectomy	Emergency contraceptives are paid for in full by your health plan.
		The cost of outpatient facilities is paid for in full by your health plan. If received during an inpatient stay, only the services related to the tubal ligation or salpingectomy are covered in full.

Please see the approved drug list at priorityhealth.com/formulary for more information about what's covered.



***Some employers may exclude contraceptives from benefits. To find out if your plan includes a service, please contact your employer or call Customer Service at the number listed on the back of your Priority Health member ID card.**

Part 2: If you're pregnant, plan to become pregnant or recently had a baby, we recommend the preventive care listed here.

Immunizations *Doses, ages and recommendations vary.*

VACCINE	BEFORE PREGNANCY	DURING PREGNANCY	AFTER PREGNANCY
Chickenpox (varicella)	Yes; avoid getting pregnant for 4 weeks	No	Yes, immediately postpartum
Hepatitis A	Yes, if at risk	Yes, if at risk	Yes, if at risk
Hepatitis B	Yes, if at risk	Yes, if at risk	Yes, if at risk
HPV (human papillomavirus)	Yes, if between ages 9 and 26	No	Yes, if between ages 9 and 26
Flu nasal spray	Yes, if less than 50 years of age and healthy. Avoid getting pregnant for 4 weeks.	No	Yes, if less than 50 years of age and healthy. Avoid getting pregnant for 4 weeks.
Flu shot	Yes	Yes	Yes
Measles, mumps, rubella (MMR)	Yes; avoid getting pregnant for 4 weeks	No	No
Meningococcal	If indicated	If indicated	If indicated
Pneumococcal	If indicated	If indicated	If indicated
Respiratory syncytial virus (RSV)	No	Yes between 32 and 36 weeks gestation	No
Tetanus	Yes (Tdap preferred)	If indicated	Yes (Tdap preferred)
Tetanus, diphtheria, whooping cough (1 dose only)	Yes	Yes	Yes

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Alcohol abuse	Screening for unhealthy alcohol use in primary care setting. Brief behavioral counseling interventions to reduce unhealthy alcohol use for those engaged in risky or hazardous drinking.
Anxiety screening	During and after pregnancy
Bacteriuria screening with urine culture	Between 12–16 weeks gestation or during first prenatal visit if later
Breastfeeding support, supplies and counseling	Lactation support and counseling to pregnant and postpartum women, including costs for rental of breastfeeding equipment. This may also include equipment and supplies as clinically indicated to support those with breastfeeding difficulties and those who need additional services.
Depression screening, counseling and intervention	Recommended for pregnant and postpartum women who are at increased risk of depression
Domestic violence and intimate partner violence screening and counseling	Yearly
Gestational diabetes screening	Asymptomatic pregnant women at 24 weeks of gestation or after and those identified as high risk for gestational diabetes. Women with a history of gestational diabetes, who have not been diagnosed with type 2 diabetes, should be screened for diabetes as early as 4 weeks postpartum, but no later than one year postpartum.
Healthy weight gain	Behavioral counseling interventions aimed at promoting healthy weight gain and preventing excess gestational weight gain in pregnancy
Hematocrit or hemoglobin screening	During the first prenatal visit
Hepatitis B screening	During the first prenatal visit
HIV screening	All pregnant women during each pregnancy

Part 2: If you're pregnant, plan to become pregnant or recently had a baby, we recommend the preventive care listed here.

Doctor visits and tests, *continued*

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION
Hypertensive disorders	Blood pressure screening throughout pregnancy
Iron-deficient anemia screening	On a routine basis
Preeclampsia screening	Screening for preeclampsia in pregnant women with blood pressure measurements throughout pregnancy
Rh(D) incompatibility screening	On first visit and follow-up testing for women at high risk
Routine maternity care	Routine prenatal and postpartum visits for all pregnant women
Sexually transmitted infection (STI) screening	Screening and counseling for chlamydia, gonorrhea and syphilis
Tobacco-use screening and counseling	During each visit. Includes cessation interventions for tobacco users and expanded counseling for pregnant tobacco users.

Drugs *Prescription required*

PRESCRIPTION	RECOMMENDATION
Folic acid supplements	During the first two to three months of pregnancy 0.4 to 0.8 mg daily.
Low-dose aspirin	For pregnant women (12 weeks gestation) who are at high risk for preeclampsia





For physician use only: Specific EPSDT requirements may vary from the guidelines. Please refer to the online Provider Manual to review the EPSDT periodicity chart for the mandated health screening program for Medicaid recipients younger than age 21.

References: Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC), Health Resources and Services Administration (HRSA), U.S. Preventive Services Task Force (USPSTF)

Go to [HealthCare.gov](https://www.healthcare.gov) (keyword "**preventive**") for a complete list of evidence-based preventive services and risk factors.