

# OhioHealthy Preventive Care Summary

The following are qualifying preventive care services provided under your OhioHealthy Medical Plan. All services are covered at 100% when you use in-network providers, and there is no deductible or copay.

Covered preventive services align with the current recommendations of the United States Preventive Services Task Force (USPSTF)<sup>1</sup>. Certain preventive services and medications are covered if certain conditions are met at no cost<sup>2</sup> to the member when administered by an in-network provider or pharmacy. This list is for reference only, not a guarantee of coverage or benefits. Contact a Member Advocate at the number on the back of your ID card to verify specific coverage.

## FOR CHILDREN AND ADOLESCENTS

SCREENINGS	IMMUNIZATIONS
<b>Blood pressure screening:</b> 0 to 11 months, 1 to 4 years, 5 to 10, 11 to 14, 15 to 17	Diphtheria, Tetanus, Pertussis (DTaP)
<b>Cervical dysplasia screening:</b> sexually active females or age 21	COVID-19
<b>Congenital hypothyroidism screening:</b> newborns	Hemophilus influenza type b (Hib)
<b>Depression screening:</b> routinely beginning at age 12	Hepatitis A
<b>Developmental screening:</b> under age 3	Hepatitis B
<b>Dyslipidemia screening:</b> once between 9 and 11 years and once between 17 and 21, and for children at higher risk of lipid disorders ages: 1 to 4, 5 to 10, 11 to 14, 15 to 17	Human Papillomavirus (HPV)
<b>Hearing loss screening:</b> for newborns, and once between 11 and 14 years, and 15 and 17	Inactivated Poliovirus
<b>Hematocrit/Hemoglobin screening</b>	Influenza (Flu)
<b>Hemoglobinopathies screening:</b> newborns	Measles, Mumps, Rubella (MMR)
<b>Hepatitis B and HIV screening:</b> for adolescents at high risk	Meningococcal
<b>Lead screening:</b> at risk of exposure	Pneumococcal (pneumonia)
<b>Phenylketonuria (PKU) screening:</b> newborns	RSV: Respiratory syncytial virus
<b>Tuberculosis screening:</b> high risk individuals	Rotavirus (RV)
<b>Visual screening</b>	Varicella (chicken pox)

# OhioHealthy Preventive Care Summary continued

## FOR WOMEN

SCREENINGS	IMMUNIZATIONS
<b>Alcohol misuse screening and counseling options</b>	COVID-19
<b>Anemia screening:</b> pregnant or may become pregnant	Hemophilus influenza type b (Hib): catch up dose if needed
<b>Blood pressure screening beginning at age 18</b>	Hepatitis A
<b>Body Mass Index (BMI) screening and counseling</b>	Hepatitis B
<b>BRCA risk assessment and genetic counseling/screening:</b> at higher risk	Herpes Zoster (shingles)
<b>Breast cancer screening (mammography):</b> every 1 to 2 years beginning at age 40	Human Papillomavirus (HPV)
<b>Cervical cancer screening:</b> 2 tests can find abnormal cervical cells <ul style="list-style-type: none"> <li>• <b>Pap test:</b> every 3 years ages 21 to 65</li> <li>• <b>Human Papillomavirus (HPV) DNA test:</b> every 5 years ages 30 to 65 with the combination of a Pap test</li> </ul>	Influenza (Flu)
<b>Chlamydia infection screening:</b> at higher risk	Measles, Mumps, Rubella (MMR)
<b>Cholesterol screening</b>	Meningococcal
<b>Colorectal cancer (colonoscopy) screening:</b> age 45 to 75	MonkeyPox: high risk individuals
<b>Depression screening</b>	Pneumococcal (pneumonia)
<b>Diabetes (Type 2) screening:</b> ages 35 to 70 who are overweight or obese	Poliovirus: catch up dose if needed
<b>Gestational diabetes screening:</b> 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes	RSV: Respiratory syncytial virus
<b>Gonorrhea screening:</b> at higher risk	Tetanus, Diphtheria, Pertussis (Tdap/Td)
<b>Hepatitis B screening:</b> pregnant at first prenatal visit	Varicella (chicken pox)
<b>Hepatitis C screening:</b> ages 18 to 79	
<b>HIV screening and counseling:</b> ages 15 to 65, and at risk	
<b>Interpersonal partner violence screening and counseling</b>	
<b>Lung Cancer screening:</b> ages 50 to 80, 20 pack-years smoker, currently smokes or quit <15 years ago	
<b>Osteoporosis screening:</b> over 65 or at high risk	
<b>Preeclampsia screening and prevention:</b> pregnant with high blood pressure	
<b>Rh incompatibility screening:</b> first pregnancy visit and between 24 to 28 weeks gestation	
<b>Syphilis screening:</b> at higher risk	
<b>Tuberculosis screening:</b> at higher risk	
<b>Well-woman visits:</b> once a year under 65	

# OhioHealthy Preventive Care Summary continued

## FOR MEN

SCREENINGS	IMMUNIZATIONS
<b>Abdominal aortic aneurysm screening:</b> one time, ages 65 to 75 who have smoked, one time	COVID-19
<b>Alcohol misuse screening and counseling</b>	Hemophilus influenza type b (Hib): catch up dose if needed
<b>Blood pressure screening beginning at age 18</b>	Hepatitis A
<b>Body Mass Index (BMI) screening and counseling</b>	Hepatitis B
<b>Cholesterol screening</b>	Herpes Zoster (shingles)
<b>Colorectal cancer (colonoscopy) screening:</b> ages 45 to 75	Human Papillomavirus (HPV)
<b>Depression screening</b>	Influenza (Flu)
<b>Diabetes (Type 2) screening:</b> ages 35 to 70 who are overweight or obese	Measles, Mumps, Rubella (MMR)
<b>Hepatitis B screening</b>	Meningococcal
<b>Hepatitis C screening:</b> ages 18 to 79	MonkeyPox: high risk individuals
<b>HIV screening:</b> ages 15 to 65, and at higher risk	Pneumococcal (pneumonia)
<b>Lung Cancer screening:</b> ages 50 to 80, 20 pack-years smoker, currently smokes or quit <15 years ago	Poliovirus: catch up dose if needed
<b>Prostate Cancer screening:</b> ages 55 to 69	RSV: Respiratory syncytial virus
<b>Routine annual physical exams</b>	Tetanus, Diphtheria, Pertussis (Tdap/ Td)
<b>Syphilis screening:</b> at higher risk	Varicella (chicken pox)ww
<b>Tuberculosis screening:</b> at higher risk	

1 U.S. Preventive Services Taskforce Recommendations: <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics>

2 An office visit copayment may be charged to health plan members for some services.