

\$0 Preventive services.

Adult preventive services (ages 18 and older)

Laboratory tests

- Complete blood count
- Prostate cancer screening
- Diabetes screening
- Cholesterol screening
- Gonorrhea screening
- Human papillomavirus (HPV) testing (once every 3 years for women ages 30 to 65)
- Chlamydia screening
- Human immunodeficiency virus (HIV) screening
- Syphilis screening
- Tuberculosis (TB) testing
- Lead screening
- BRCA 1 and 2 testing (covered once per lifetime for high-risk individuals who meet criteria)
- Hepatitis B virus screening (covered for high-risk individuals who meet criteria)
- Hepatitis C virus screening (once per lifetime for individuals over age 50)

Procedures

- Pap test (once every 3 years for women ages 21 and older)
- Lung cancer screening (between ages 50 and 80)
- Screening mammogram (once every 275 days)
- Colonoscopy/colon cancer screening (once every five years for ages 45 to 75)
- Abdominal aortic aneurysm screening (men only, once between ages 65 and 75)
- Bone density/DEXA (once every two years for women ages 60 and older)
- Certain sterilization procedures (such as tubal ligation)

Examinations/counseling

- Physical exam
- Eye exam
- Tobacco use counseling
- Alcohol misuse screening and counseling
- Annual hearing screening (ages 65 and older)
- Glaucoma screening (once every 12 months)

- Sexually transmitted infections counseling
- Dietary counseling (5 visits every 12 months; only for certain diet-related chronic diseases)
- Depression screening

Immunizations

- Influenza
- Tetanus or Tetanus, Diphtheria and Pertussis (Td, Tdap)
- Pneumococcal
- Hepatitis A and B
- Meningitis
- Zoster (ages 18 and older)
- Human papillomavirus (HPV) (ages 9 to 45)
- Varicella (including MMRV)
- Measles, Mumps, Rubella (MMR)

Contraception

Most contraceptives are covered as a preventive service under your pharmacy benefits.

- Cervical cap with spermicide
- Diaphragm with spermicide
- Emergency contraception (Ella, Plan B)
- Female condom
- Implantable rod
- IUDs
- Generic oral contraceptives (combined pill, progestin only, or extended/continuous use)
- Patch
- Shot/injection (Depo-Provera)
- Spermicide
- Sponge with spermicide
- Surgical sterilization for women (tubal ligation)
- Surgical sterilization implant for women
- Vaginal Contraceptive Ring

Pediatric preventive services (younger than age 18)

Procedures/counseling

- Preventive well-child visit (no limit from birth to age 12; every 275 days from ages 12 to 18).
- Eye exam
- Depression screening
- Developmental testing
- Newborn hearing screening (once per lifetime)
- Annual hearing screening (ages 21 and younger)
- Application of fluoride varnish (younger than age 5)
- Dietary counseling (5 visits every 12 months; only for certain diet-related chronic diseases)

Laboratory tests

- Newborn metabolic screening (younger than age 1)
- HIV screening
- PKU screening (younger than age 1)
- Thyroid (younger than age 1)
- Sickle cell disease screening (younger than age 1)
- Lead screenings
- Tuberculosis (TB) testing
- Hepatitis B virus screening (covered for high-risk individuals who meet criteria)

Immunizations

These are recommended by the Centers for Disease Control Advisory Committee on Immunization Practices.

- Measles, Mumps Rubella (MMR)
- Diphtheria, tetanus, pertussis (DtaP, DT, DTP)
- Haemophilus influenzae type B (Hib, DTaP-IPV-Hib, DTP-Hib, DTaP-Hib)
- Polio (OPV, IPV, DtaP-Hep-LPV)
- Influenza
- Pneumococcal
- Hepatitis A
- Hepatitis B
- Meningitis
- Varicella (including MMRV)
- Rotavirus
- Human papillomavirus (HPV) (ages 9 to 45)

Obstetrical preventive services

These are specific to pregnant women. To determine which additional non-obstetrical services may be considered preventive, please refer to the Adult or Pediatric Preventive Services lists.

Laboratory tests

- Iron deficiency anemia screening
- Diabetes screening
- Urine study to detect asymptomatic bacteriuria (first prenatal visit or at 12-16 weeks gestation)
- Rubella screening
- Rh(D) incompatibility screening
- Hepatitis B infection screening (at first prenatal visit)
- Gonorrhea screening
- Chlamydia screening
- Syphilis screening

Breast-feeding supplies and support

- Breast pump, electronic AC or DC (one per pregnancy)
- Lactation class (one per pregnancy at an in-network facility)

If your provider finds a condition that needs further testing or treatment, you'll need to pay regular copays, coinsurance or deductibles.

If you have questions about your plan or coverage, email us at customerservice@slhealthplan.org or call the customer service number, **833-840-3600**, to speak with representatives who are happy to assist you.