

# Routine Preventive Services



In-Network routine preventive care services and the related office visit for routine preventive care services is covered at 100%.

## Routine Service/Procedure

**Prostate exams** and prostate specific antigen (PSA) tests

**Pelvic exams and pap smears\***, including those performed at the direction of a Physician in a mobile facility certified by Centers for Medicare and Medicaid Services (CMS).

**Mammograms** if ordered by a Physician, including those performed at the direction of a Physician in a mobile facility certified by CMS.

**Colorectal cancer exams\*** and laboratory tests consisting of a digital rectal exam and the following:

- Fecal occult blood test;
- Flexible sigmoidoscopy;
- Colonoscopy;
- Double contrast barium enema

**Newborn hearing screening**, audiological assessment and follow-up, and initial amplifications

### Childhood Immunizations\*

- At least 5 doses of vaccine against diphtheria, pertussis, tetanus;
- At least 4 doses of vaccine against polio, Haemophilus Influenza Type b (Hib);
- At least 3 doses of vaccine against Hepatitis B;
- 2 doses of vaccine against measles, mumps, and rubella;
- 2 doses of vaccine against varicella;
- At least 4 doses of vaccine against pediatric pneumococcal (PCV7);
- 1 dose of vaccine against influenza;
- At least one dose of vaccine against Hepatitis A;
- 3 doses of vaccine against Rotavirus;
- Such other vaccines and dosages as may be prescribed by the State Department of Health

### Lead testing

### Physician Examinations\*

#### Additional examinations, testing and services:

- Hemoglobin/Complete Blood Count (CBC)
- Metabolic screening\*
- Hearing exams

#### Immunizations:

Covered Immunizations are limited to the age ranges and gender recommended by the Advisory Committee on Immunization Practices and/or adopted by the Center for Disease Control.\*

- Catch-up for Hepatitis B
- Catch-up for varicella
- Catch-up for MMR
- Tetanus boosters as necessary, including tetanus, diphtheria and pertussis; diphtheria and tetanus; and tetanus only
- Pneumococcal vaccine
- Influenza virus vaccine
- Meningococcal vaccine
- Catch-up for Hepatitis A
- HPV vaccine
- Zoster vaccine
- Polio vaccine
- Haemophilus Influenza Type b (Hib) vaccine

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## Routine Service/Procedure

Urinalysis	Tobacco use and tobacco-caused disease counseling (adults and pregnant)
Glucose screening	Phenylketonuria (PKU) screening (newborns)
Thyroid stimulating hormone screening	Rh(D) incompatibility screening (pregnant)
Lipid cholesterol panel*	Sickle Cell disease screening (newborns)
HIV screening*	Syphilis infection screening
HPV testing	Asymptomatic Bacteriuria screening (pregnant)
Chlamydia Trachomatis testing*	Tuberculosis screening – tuberculin skin test (children under 19)
Gonorrhea testing	Prevention of dental caries with oral fluoride (children up to 6 years)
Electrocardiogram (EKG)	Visual acuity screening (children up to 5 Years)
Chest x-ray	Obesity screening and offer intensive counseling and behavioral interventions (adults and children)
Congenital Hypothyroidism screening (newborns)	Discuss Chemoprevention (high risk for breast cancer)
Gonorrhea, prophylactic eye medication (newborns)	Major Depressive Disorder screening (adolescents)
Hepatitis B virus infection screening (pregnant)	Risk assessment and referral for BRCA Testing and associated genetic counseling (Women)
Iron deficiency (Anemia) screening (pregnant)	Generic prescription contraceptives, devices, implants, and permanent sterilization procedures †
Osteoporosis screening (women 60+)	Breast pump and breastfeeding support (post-delivery) †
Alcohol misuse screening and behavioral counseling intervention (adults and pregnant)	Interpersonal and domestic violence screening and counseling †
Adult aortic aneurysm screening (men age 65-75+)	
Intensive behavioral dietary counseling for those with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease (adults)	
Breastfeeding counseling	
Depression screening (adults)	
High blood pressure screening (adults)	
Sexually Transmitted Infections Counseling	

**Out-of-Network Services:** All services received from an out-of-network provider are subject to the out-of-network deductible and coinsurance, except for childhood immunizations, which are paid at 100%. This summary is being provided for informational purposes only, and is subject to changes. The actual Routine Preventive Care Services are subject to the terms, conditions, and limitations of your Contract/Certificate of Coverage.

\* Indicates services that are required by the Affordable Care Act (ACA), but are already covered by Blue Cross and Blue Shield of Kansas City.

† Indicates services that are required by the ACA as part of the Preventive Services for Women.



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