

Highlights of your preventive care benefits

Applies to non-grandfathered individual and group plans

You pay nothing – no coinsurance, copayment or deductible – for covered preventive care services when you visit in-network providers. Preventive care benefits for services from out-of-network providers are subject to your out-of-network benefit.

The listed preventive care services may be adjusted to agree with federal government changes, updates and revisions.

Services for adults (18 years and older)	Services for adults (continued)	Services for children (17 years and younger)	
<ul style="list-style-type: none"> • Annual adult physical examinations • Abdominal aortic aneurysm screening • Behavioral counseling for participants who are overweight or obese • Bone density • Breast cancer (BRCA) risk assessment and genetic counseling and testing for high-risk family history of breast or ovarian cancer • Chemistry panels • Cholesterol screening • Colorectal cancer screening • Complete blood count (CBC) • Diabetes screening • Diet and physical activity behavioral counseling • Health risk assessment for depression • Hepatitis B virus screening • Hepatitis C virus infection screening • HIV assessment • Lung cancer screening for participants age 50 and older • Pap test 	<ul style="list-style-type: none"> • PSA test • Screening and assessment for interpersonal and domestic violence • Screening mammogram • Skin cancer prevention counseling • Sexually transmitted infections assessment • Tobacco, alcohol or drug use assessment and counseling • Transmittable disease screening and counseling (chlamydia, gonorrhea, human immunodeficiency virus [HIV], human papillomavirus [HPV], syphilis, tuberculosis [TB]) • Thyroid-stimulating hormone (TSH) • Urinalysis (UA) • Urinary incontinence screening • Well-woman visits for recommended age-appropriate preventive services 	<ul style="list-style-type: none"> • Anemia screening • Dental fluoride application for participants age 5 and younger • Lipid disorder screening • Preventive lead screening • Rubella screening • Skin cancer prevention counseling • Routine or scheduled well-baby and well-child examinations, including vision, hearing and developmental screenings • Newborn screenings: <ul style="list-style-type: none"> • Hearing test • Metabolic screening (PKU, thyroxine, sickle cell) • Screening EKG <p>Please note: Not all children require all the services identified above. Your provider should give you information about your child’s growth, development and general health, and answer any questions you may have.</p>	
	Services for pregnant women or women who may become pregnant		
	<ul style="list-style-type: none"> • Behavioral counseling for healthy weight and weight gain in pregnancy • Breastfeeding support, supplies and counseling • Gestational diabetes screening • Iron deficiency screening • Perinatal depression counseling and intervention • Preeclampsia screening • Prescribed contraceptive coverage¹ • RhD incompatibility screening • Urine culture 		

¹For groups that offer prescribed contraceptive coverage: Blue Cross of Idaho pays 100% of the cost of women’s preventive prescription drugs and devices as specifically listed on the Blue Cross of Idaho Formulary on our website at bcidaho.com; deductible does not apply. The day supply allowed shall not exceed a 90-day supply at one time, as applicable to the specific contraceptive drug or supply. Prescribed contraceptive services include diaphragms, intrauterine devices (IUDs), implantables, injections and tubal ligation.

Immunization
Acellular pertussis
Diphtheria
Haemophilus influenzae B
Hepatitis B
Influenza
Measles
Mumps
Pneumococcal (pneumonia)
Poliomyelitis (polio)
Rotavirus
Rubella
Tetanus
Varicella (chicken pox)
Hepatitis A
Meningococcal
Human Papillomavirus (HPV)
Zoster
Other immunizations not specifically listed may be covered at the discretion of Blue Cross of Idaho when medically necessary.

Please note: Your provider must bill these services as preventive/wellness services.

The descriptions above are general in nature, to allow for an overall view of Blue Cross of Idaho’s preventive care coverage. For complete descriptions of your policy and policy changes, please read your policy and policy amendment language.

Updates for 2022: Replaced “alcohol - unhealthy use screening” and “smoking cessation counseling visit” with “tobacco, alcohol or drug use assessment and counseling.” Replaced “dietary counseling (limited to three visits per participant, per benefit period)” with “dietary and physical activity behavioral counseling” and removed visit limit. Updated age recommendation for lung cancer screening from ag 50 to age 55. Added “behavioral counseling for healthy weight and weight gain in pregnancy.”