Preventive services as described in the United States Preventive Services Task Force A and B Recommendations, the Advisory Committee on Immunization Practices (ACIP) under the Centers for Disease Control and Prevention (CDC), and the Health Resources and Services Administration (HRSA) Guidelines, including the American Academy of Pediatrics Bright Futures Periodicity Schedule.

**Doses, recommended ages and recommended populations vary.**

Visit these web sites to learn more: [www.hhs.gov/healthcare/rights/preventive-care](http://www.hhs.gov/healthcare/rights/preventive-care) • [www.hhs.gov/safety/index.html](http://www.hhs.gov/safety/index.html)

Please note that the preventive health care services listed above are not recommended for everyone. This chart represents current benefits as of January 1, 2014. Vaccine recommendations change. You and your health care provider should decide what care is most appropriate. For specific benefit coverage details and limitations, refer to your plan documents or call The Empire Plan toll free at 1-877-7-NEWSHIP (1-877-769-7447).

### Children

Yearly preventive care (well-child) visits that include height, weight and body mass index measurements, developmental screenings, behavioral assessments and medical history are covered, as well as the screenings, tests, counseling and vaccines** listed below. **Note:** Vaccines purchased at a pharmacy are not covered.

<table>
<thead>
<tr>
<th>Screenings • Tests • Counseling</th>
<th>Vaccines</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Certain newborn screenings including, but not limited to, thyroid disease, phenylketonuria (PKU), sickle cell disease and hearing</td>
<td>• Hepatitis A</td>
</tr>
<tr>
<td>• Gonorrhea preventive topical eye medication for newborns</td>
<td>• Hepatitis B</td>
</tr>
<tr>
<td>• Developmental/autism screening</td>
<td>• Tetanus, Diphtheria, Pertussis (Td/Tdap)</td>
</tr>
<tr>
<td>• Hematocrit or Hemoglobin and blood pressure screenings</td>
<td>• Influenza (flu)</td>
</tr>
<tr>
<td>• Cholesterol and lipid screening for children at higher risk</td>
<td>• Haemophilus influenza type b (Hib)</td>
</tr>
<tr>
<td>• Lead exposure screening</td>
<td>• Poliovirus (polio)</td>
</tr>
<tr>
<td>• Tuberculosis screening</td>
<td>• Measles, Mumps, Rubella (MMR)</td>
</tr>
<tr>
<td>• Visual acuity screening for children under age five</td>
<td>• Rotavirus</td>
</tr>
<tr>
<td>• Hearing screening</td>
<td>• Varicella (Chickenpox)</td>
</tr>
<tr>
<td>• Obesity screening and counseling for children age six and older</td>
<td>• Meningococcal polysaccharide (Meningitis)</td>
</tr>
<tr>
<td>• Screening for major depressive disorders</td>
<td>• Pneumococcal conjugate (Pneumonia)</td>
</tr>
<tr>
<td>• HIV screening and sexually transmitted infections (STIs) screenings and prevention counseling for adolescents at higher risk</td>
<td>• Human Papillomavirus (HPV)</td>
</tr>
<tr>
<td>• Cervical dysplasia screening when necessary</td>
<td>•</td>
</tr>
<tr>
<td>• Screening and counseling for interpersonal and domestic violence</td>
<td>•</td>
</tr>
<tr>
<td>• Skin cancer counseling for children and adolescents beginning age 10</td>
<td>•</td>
</tr>
<tr>
<td>• Counseling and education by primary care clinicians to prevent initiation of tobacco use in school-aged children and adolescents</td>
<td>•</td>
</tr>
</tbody>
</table>

**Preventive services as described in the United States Preventive Services Task Force A and B Recommendations, the Advisory Committee on Immunization Practices (ACIP) under the Centers for Disease Control and Prevention (CDC), and the Health Resources and Services Administration (HRSA) Guidelines, including the American Academy of Pediatrics Bright Futures Periodicity Schedule.

**Doses, recommended ages and recommended populations vary.**
**Adults**

Yearly preventive care physical and well-woman exams are covered, as well as the screenings, tests, counseling and vaccines** listed below.

*Note:* Vaccines purchased at a pharmacy are not covered.

### Screenings • Tests • Counseling

- Cholesterol and lipid screening beginning at age 20 for high-risk adults
- Screening for diabetes in those adults with high blood pressure
- Colorectal cancer screening including fecal occult blood test, sigmoidoscopy and colonoscopy, beginning at age 50 to 75
- Screening for depression
- Screening for gonorrhea, chlamydia, syphilis and HIV
- Counseling for sexually transmitted infections (STIs)
- Screening and counseling for alcohol misuse, tobacco use, obesity, diet and nutrition in a primary care setting
- Screening for abdominal aortic aneurysm in men age 65 to 75 who have ever smoked
- Bone density test to screen for osteoporosis for women 65 and older or women at risk
- Breast cancer screening mammography every one to two years for women, beginning at age 40
- Counseling and evaluation for genetic testing of women for BRCA breast cancer gene
- Counseling women at high risk of breast cancer for chemoprevention
- Screening women for cervical cancer up to age 65 including Pap test
- Prenatal care and screenings including, but not limited to, iron deficiency anemia, bacteriuria, Hepatitis B, Rh incompatibility, syphilis, gonorrhea, chlamydia
- Screening for Gestational Diabetes for women who are 24 to 28 weeks pregnant or first visit for high risk
- Human Papillomavirus DNA testing every three years for women age 30 and over
- Screening and counseling for interpersonal and domestic violence
- For women, all Food and Drug Administration-approved contraceptive methods and sterilization procedures and patient education and counseling***
- Breastfeeding support, supplies and counseling, including costs for purchase of breastfeeding equipment in conjunction with each birth
- Skin cancer counseling for young adults through age 24

### Vaccines

- Hepatitis A
- Hepatitis B
- Measles, Mumps, Rubella (MMR)
- Tetanus, Diphtheria, Pertussis (Td/Tdap)
- Varicella (Chickenpox)
- Influenza (flu)
- Pneumococcal conjugate (Pneumonia)
- Meningococcal Polysaccharide (Meningitis)
- Human Papillomavirus (HPV)
- Herpes Zoster (Shingles)

Copayment applies if under age 60

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**Doses, recommended ages and recommended populations vary.

***Most Level 1 contraceptives covered under The Empire Plan Prescription Drug Program are available without cost-share to enrollees.

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