Preventive care – important to helping you stay healthy.

No matter your age, there are preventive care services for you.

Preventive care may help you, and those you love, discover a health issue before it becomes a serious problem. Taking steps like following the recommended guidelines and listening to your doctor may help you, and your family, stay healthy. The following guidelines are for children and adults.

Under the Affordable Care Act (ACA),¹ you can get certain preventive health care services, covered at 100 percent, without any cost to you. Just obtain your preventive care from a health plan network provider. Diagnostic (non-preventive) services are also covered, but you may have to pay a copayment, coinsurance or deductible. Check your plan documents to make sure.
Preventive checkups for children include certain screening, counseling and immunizations. You can help your child’s healthy growth and development by scheduling regular checkups with your network doctor for the preventive care services based on your child’s age. Tell the doctor about illnesses or medical conditions your child may have, and any medicines your child takes.

The doctor will likely:

• Ask you questions about your child’s growth and development.
• Give your child a physical examination.
• Make sure your child has up-to-date immunizations.
• Give you advice to help your child stay safe and healthy.

**Recommended preventive care services for children will vary based on age and may include some of the following:**

• Age-appropriate well-child examination.
• Measurement of your child’s head size.
• Measurement of your child’s length/height and weight.
• Metabolic screening panel for newborns.
• Screening blood tests, if appropriate.
• Age-appropriate immunizations.
• Vision screening, by primary care physician, for children under age 6.
• Oral health risk assessment.
• Fluoride application for children under age 6, under certain circumstances.
• Hearing screening.
• Autism screening.
• Counseling on the harmful effects of smoking and illicit use of drugs (children and adolescents).
• Counseling for children and their parents on promoting a healthy diet and exercise.
• Screening certain children at high risk for sexually transmitted diseases, lead, depression, tuberculosis and more.
• Evaluating the need for iron supplements.

Not all children require all of the services identified above. Your doctor should give you information about your child’s growth, development and general health, and answer any questions you may have.

Source: www.archive.ahrq.gov/clinic/prevenix.htm
Source: www.allkids.com/customers/checkups.html
Development, psychosocial and chronic disease issues for children and adolescents may require frequent counseling and treatment visits separate from preventive care visits. These guidelines represent a consensus by the American Academy of Pediatrics (AAP) and Bright Futures. The recommendations in this statement do not indicate an exclusive course of treatment or standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Discuss with your doctor how these guidelines may be right for your child, and always consult your doctor before making any decisions about medical care.

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice.

Preventive care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.
Immunizations can help protect your child against many childhood diseases. The following immunization schedule provided by the Centers for Disease Control and Prevention (CDC) will provide you with the guideline recommendations for children 18 years or younger.

**Recommended immunization schedule for children and adolescents aged 18 years or younger—United States, 2017.**

For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the gray bars. School entry and adolescent vaccine age groups are shaded in dark gray.

![Immunization Chart](https://www.cdc.gov/vaccines/pubs/ACIP-list.htm)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Birth</th>
<th>1 mo</th>
<th>2 mos</th>
<th>4 mos</th>
<th>6 mos</th>
<th>9 mos</th>
<th>12 mos</th>
<th>15 mos</th>
<th>18 mos</th>
<th>19-23 mos</th>
<th>2-3 yrs</th>
<th>4-6 yrs</th>
<th>7-10 yrs</th>
<th>11-12 yrs</th>
<th>13-15 yrs</th>
<th>16 yrs</th>
<th>17-18 yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B (HepB)</td>
<td>1st</td>
<td>2nd</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3rd dose</td>
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<tr>
<td>Rotavirus (RV) RV1 (2-dose series), RV5 (3-dose series)</td>
<td>1st dose</td>
<td>2nd dose</td>
<td></td>
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<tr>
<td>Diphtheria, tetanus, &amp; acellular pertussis (DTaP: &lt;7 yrs)</td>
<td>1st dose</td>
<td>2nd dose</td>
<td>3rd dose</td>
<td>4th dose</td>
<td>5th</td>
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<tr>
<td>Haemophilus influenzae type b (Hib)</td>
<td>1st</td>
<td>2nd</td>
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<td>3rd or 4th dose</td>
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<tr>
<td>Pneumococcal conjugate (PCV13)</td>
<td>1st</td>
<td>2nd</td>
<td>3rd</td>
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<td></td>
<td>4th dose</td>
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<tr>
<td>Inactivated poliovirus (IPV: &lt;18 yrs)</td>
<td>1st</td>
<td>2nd</td>
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<td>3rd dose</td>
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<td></td>
</tr>
<tr>
<td>Influenza (IV)</td>
<td></td>
<td></td>
<td>Annual vaccination (IV) 1 or 2 doses</td>
<td>Annual vaccination (IV) 1 dose only</td>
<td></td>
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<tr>
<td>Measles, mumps, rubella (MMR)</td>
<td>1st</td>
<td></td>
<td>2nd</td>
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<tr>
<td>Varicella (VAR)</td>
<td>1st</td>
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<td>2nd</td>
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<tr>
<td>Hepatitis A (HepA)</td>
<td>1st</td>
<td>2nd</td>
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<tr>
<td>Meningococcal (Hib-MenCY &gt;6 weeks; MenACWY-D &gt;9 mos; MenACWY-CRM≥2 mos)</td>
<td>1st dose</td>
<td>2nd dose</td>
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<td></td>
<td></td>
<td>1st dose</td>
<td>2nd</td>
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<tr>
<td>Tetanus, diphtheria, &amp; acellular pertussis (Tdap: &gt;7 yrs)</td>
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<td>Tdap</td>
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<tr>
<td>Human papillomavirus (HPV)</td>
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<tr>
<td>Meningococcal B</td>
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<tr>
<td>Pneumococcal polysaccharide (PPSV23)</td>
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</table>

**Note:** If your child misses a shot, talk with your child’s doctor for his or her direction and to answer any questions about vaccines.

If your child has any medical conditions that put him or her at risk for infection or is traveling outside of the United States, talk to your child’s doctor about additional vaccines that he or she may need.

**SOURCE:** Centers for Disease Control and Prevention, Recommended immunization schedules for children and adolescents aged 18 years or younger—United States, 2017, at: www.cdc.gov/vaccines/pubs/ACIP-list.htm.

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Preventive Care Screening Guidelines* and Counseling Services for Adult Men.

A preventive health visit can help you see how healthy you are now and help identify any health issues before they become more serious. You and your doctor can then work together to choose the care that may be right for you. The following information provides guideline recommendations for preventive care screenings and counseling to evaluate general health and development in men over age 18.

Recommended preventive care services for men include the following:

- Wellness examinations.
- **Abdominal Aortic Aneurysm Screening** – for age 65 – 75 years who have ever smoked.
- **Alcohol Screening and Brief Counseling** – screening during wellness examinations. Brief counseling interventions for certain patients.
- **Blood Pressure Screening** – at each wellness examination. Certain patients may also require ambulatory blood pressure measurements outside of a clinical setting. Check with your doctor.
- **Cholesterol Screening** – for age 40 – 75 years.
- **Colorectal Cancer Screening** – for age 50 – 75 years.
  Ask your physician about screening methods and intervals for screening.
- **Depression Screening** – for all adults, in a primary care setting.
- **Diabetes Screening** – for age 40 – 70 years who are overweight or obese.
- **Falls Prevention Counseling** – during wellness examination, for community-dwelling older adults.
- **Healthy Diet Behavioral Counseling** – for persons with cardiovascular disease risk factors, in a primary care setting.
- **Hepatitis B Virus Infection Screening** – for persons at high risk.
- **Hepatitis C Virus Infection Screening** – one time screening for adults born between 1945 – 1965, or, persons at high risk.
- **Human Immunodeficiency Virus (HIV) Screening**.
- **Immunizations** – FDA approved and have explicit ACIP recommendations for routine use.
- **Latent Tuberculosis Infection Screening** – for persons at increased risk.
- **Lung Cancer Screening with Low-Dose CT Scan** – for age 55 – 80 years with at least a 30 pack-year smoking history (requires prior authorization).
- **Obesity Screening and Counseling** – at each wellness examination. Certain patients may need medical nutrition therapy.

- **Sexually Transmitted Infections, Behavioral Counseling to Prevent** – behavioral counseling for adults who are at increased risk, in a primary care setting.
- **Skin Cancer, Behavioral Counseling to Prevent** – at each wellness examination, for young adults up to age 24 years.
- **Syphilis Screening** – for adults at increased risk.
- **Tobacco Cessation, Screening, Behavioral Counseling** – screening, and behavioral counseling for adults who smoke, in a primary care setting (refer to pharmacy vendor for pharmacotherapy for tobacco cessation).

* These guidelines are based, in part, on the requirements of the Patient Protection and Affordable Care Act, and recommendations of the U.S. Preventive Services Task Force (USPSTF), U.S. Department of Health and Human Services and the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions that may not be covered as a preventive benefit. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Preventive care benefits may not apply to certain services listed above. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.
Recommended preventive care services for women include the following:

- **Wellness Examinations, Well-Woman Visits** – well-woman visits, including routine, low-risk, prenatal visits.
- **Abdominal Aortic Aneurysm Screening** – for age 65 – 75 years who have ever smoked.
- **Alcohol Screening and Brief Counseling** – screening during wellness examinations. Brief counseling interventions for certain patients.
- **Bacteriuria Screening** – during pregnancy.
- **Blood Pressure Screening** – at each wellness examination. Certain patients may also require ambulatory blood pressure measurements outside of a clinical setting. Check with your doctor.
- **Breastfeeding Primary Care Interventions, Counseling, Support and Supplies** – during pregnancy and after birth. Includes personal use electric breast pump.
- **Cervical Cancer Screening (Pap Smear)** – women age 21 – 65 years old.
- **Chlamydia and Gonorrhea Infection Screening** – for sexually active women age 24 and younger, and older women at increased risk.
- **Cholesterol Screening** – for age 40 – 75 years.
- **Colorectal Cancer Screening** – for age 50 – 75 years. Ask your physician about screening methods and intervals for screening.
- **Contraceptive Methods (Including Sterilizations)** – FDA-approved methods of contraception for women, including patient education and counseling.
- **Depression Screening** – for all adults, in a primary care setting.
- **Diabetes Screening** – for age 40 – 70 years who are overweight or obese.
- **Falls Prevention Counseling** – during wellness examination, for community-dwelling older adults.
- **Genetic Counseling and Evaluation for BRCA Testing, and BRCA Lab Testing** – lab testing requires prior authorization.
- **Gestational Diabetes Mellitus Screening** – during pregnancy.
- **Healthy Diet Behavioral Counseling** – for persons with cardiovascular disease risk factors, in a primary care setting.
- **Hepatitis B Virus Infection Screening** – for persons at high risk.
- **Hepatitis C Virus Infection Screening** – one-time screening for adults born between 1945 – 1965, or, persons at high risk.
- **Human Immunodeficiency Virus (HIV) Screening** – for all adults.
- **Human Papillomavirus DNA Testing** – for women age 30 to 65.
- **Immunizations** – FDA approved and have explicit ACIP recommendations for routine use.
- **Intimate Partner Violence, Interpersonal and Domestic Violence, Counseling and Screening** – during wellness examination.
- **Latent Tuberculosis Infection Screening** – for persons at increased risk.
- **Lung Cancer Screening with Low-Dose CT Scan** – for age 55 – 80 years with at least a 30 pack-year history (with prior authorization).
- **Mammography Screening**.
- **Obesity Screening and Counseling** – at each wellness examination. Certain patients may need medical nutrition therapy.
- **Osteoporosis Screening** – women age 65 and older, and younger women at increased risk.
- **Rh Incompatibility Screening** – during pregnancy.
- **Sexually Transmitted Infections, Behavioral Counseling to Prevent** – behavioral counseling for adults who are sexually active or otherwise at increased risk, in a primary care setting.
- **Skin Cancer, Behavioral Counseling to Prevent** – at each wellness examination, for young adults up to age 24 years.
- **Syphilis Screening** – for adults at increased risk.
- **Tobacco Cessation, Screening, Behavioral Counseling** – screening, and behavioral counseling for adults who smoke, in a primary care setting (refer to pharmacy vendor for pharmacotherapy for tobacco cessation).

* These guidelines are based, in part, on the requirements of the Patient Protection and Affordable Care Act, and recommendations of the U.S. Preventive Services Task Force (USPSTF), U.S. Department of Health and Human Services and the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. They are provided for informational purposes only, and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions and may not be covered as a preventive benefit. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.
Immunizations may help protect against many illnesses and diseases. The following immunization schedule provided by the Centers for Disease Control and Prevention (CDC) will give you the recommendations for adults over age 18.

**Recommended immunization schedule for adults aged 19 years or older by age group, United States, 2017.**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>19-21 years</th>
<th>22-26 years</th>
<th>27-59 years</th>
<th>60-64 years</th>
<th>≥ 65 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza</td>
<td>1 dose annually</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Td/Tdap</td>
<td>Substitute Tdap for Td once, then Td booster every 10 yrs</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>MMR</td>
<td>1 or 2 doses depending on indication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VAR</td>
<td>2 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>HZV</td>
<td></td>
<td></td>
<td>1 dose</td>
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<td></td>
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<tr>
<td>HPV–Female</td>
<td>3 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HPV–Male</td>
<td>3 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PCV13</td>
<td>1 dose</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>PPSV23</td>
<td>1 or 2 doses depending on indication</td>
<td></td>
<td></td>
<td>1 dose</td>
<td></td>
</tr>
<tr>
<td>HepA</td>
<td>2 or 3 doses depending on vaccine</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>HepB</td>
<td>3 doses</td>
<td></td>
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<tr>
<td>MenACWY or MPSV4</td>
<td>1 or more doses depending on indication</td>
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<tr>
<td>MenB</td>
<td>2 or 3 doses depending on vaccine</td>
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<tr>
<td>Hib</td>
<td>1 or 3 doses depending on indication</td>
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</tbody>
</table>

Additional information about the vaccines in this schedule, extent of available data, including a full list of footnotes and contraindications for vaccination is also available at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines) or from the CDC-INFO Contact Center at 1-800-CDC-INFO (1-800-232-4636) in English and Spanish, 8 a.m. - 8 p.m. Eastern Time, Monday - Friday, excluding holidays. For a complete list of footnote references, please visit: [www.cdc.gov/vaccines/schedules/downloads/adult/adult-schedule.pdf](http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-schedule.pdf).

The recommendations in this schedule were approved by the Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices (ACIP).

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**Our website at [www.uhc.com/preventivecare](http://www.uhc.com/preventivecare) has more information on preventive guidelines for your age. The guidelines are based on recommendations of the U.S. Preventive Services Task Force and other health organizations. You can also email, download or print your results. Use this information to talk to your doctor about the services that may be right for you.**