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Preventive care covered with no cost sharing

Get checkups, screenings, vaccines, prenatal care, contraceptives and more with no out-of-pocket costs

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Good news! Your health benefits and insurance plan covers the services listed here with no cost share¹ as part of preventive care.

This includes routine screenings and checkups. It also includes counseling you get to prevent illness, disease or other health problems.

Many of these services are covered as part of physical exams. These include regular checkups, and routine gynecological and well-child exams. You won't have to pay out of pocket for these preventive visits, when provided in network.

But these services are generally not preventive if you get them as part of a visit to diagnose, monitor or treat an illness or injury. Then copays, coinsurance and deductibles may apply.

Aetna follows the recommendations of national medical societies about how often children, men and women need these services. Be sure to talk with your doctor about which services are right for your age, gender and health status.

Covered preventive services for adults generally include:

Screenings for:

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Blood pressure
- Cholesterol (for adults of certain ages or at higher risk)
- Colorectal cancer (for adults over 50)
- Depression
- Type 2 diabetes (for adults with high blood pressure)
- HIV
- Obesity
- Tobacco use
- Syphilis (for all adults at higher risk)

Medications and supplements:

- Aspirin for men and women age 45 and older with certain cardiovascular risk factors
- Vitamin D supplements for adults age 65 and older with certain conditions

Counseling for:

- Alcohol misuse
- Diet (for adults with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease)
- Obesity
- Sexually transmitted infection (STI) prevention (for adults at higher risk)
- Tobacco use (including programs to help you stop using tobacco)

Immunizations:

Doses, recommended ages, and recommended populations vary

- Diphtheria, pertussis, tetanus (DPT)
- Hepatitis A and B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chicken pox)

¹Employers with grandfathered plans may choose not to cover some of these preventive services, or to include cost share (deductible, copay or coinsurance) for preventive care services. Certain religious employers and organizations may choose not to cover contraceptive services as part of the group health coverage.

Covered preventive services for women

Screenings and counseling for:

- BRCA (counseling and genetic testing for women of high risk with no personal history of breast and/or ovarian cancer)
- Breast cancer chemoprevention (for women at higher risk)
- Breast cancer (mammography every 1 to 2 years for women over 40)
- Cervical cancer (for sexually active women)
- Chlamydia infection (for younger women and other women at higher risk)
- Gonorrhea (for all women at higher risk)
- Interpersonal or domestic violence
- Osteoporosis (for women over age 60 depending on risk factors)

Medications and supplements:

• Folic acid supplements (for women of child-bearing ages)

Contraceptive products and services:

- Prescribed FDA-approved female over-the-counter or generic contraceptives² when filled at an in-network pharmacy
- Two visits a year for patient education and counseling on contraceptives is also covered under your Aetna medical plan

Covered preventive services for pregnant women

- Routine prenatal visits (you pay your normal cost share for delivery, postpartum care, ultrasounds or other maternity procedures, specialist visits and certain lab tests)
- Anemia screenings
- Diabetes screenings
- Bacteriuria urinary tract or other infection screenings
- Rh incompatibility screening, with follow-up testing for women at higher risk
- Hepatitis B counseling (at the first prenatal visit)
- Expanded counseling on tobacco use
- Breastfeeding interventions to support and promote breastfeeding after delivery, including up to six visits with a lactation consultant

Covered preventive supplies for pregnant women

- Certain standard electric breastfeeding pumps (non-hospital-grade) anytime during pregnancy or while you are breastfeeding once every three years
- Manual breast pump any time during pregnancy or after delivery for the duration of breastfeeding
- Breast pump supplies, if you get pregnant again before you are eligible for a new pump

For more information go to **www.aetna.com** and search for "breast pumps." Or call Member Services for details on how to use this benefit.

Covered preventive services for children

Screenings and assessments for:

- Alcohol and drug use (for adolescents)
- Autism (for children at 18 and 24 months)
- Behavioral issues
- Cervical dysplasia (for sexually active females)
- Congenital hypothyroidism (for newborns)
- Developmental screening (for children under age 3, and surveillance throughout childhood)
- Hearing (for all newborns)
- Height, weight and body mass index measurements
- Lipid disorders (dyslipidemia screening for children at higher risk)
- Hematocrit or hemoglobin
- Hemoglobinopathies or sickle cell (for newborns)
- HIV (for adolescents at higher risk)
- Lead (for children at risk of exposure)
- Medical history
- Obesity
- Oral health (risk assessment for young children)
- Phenylketonuria (PKU) (newborns)
- Tuberculin testing (for children at higher risk of tuberculosis)
- Vision

Medications and supplements:

- Gonorrhea preventive medication for the eyes of all newborns
- Iron supplements (for children ages 6 to 12 months at risk for anemia)
- Oral fluoride for children 6 months to 5 years of age (prescription supplements for children without fluoride in their water source)

Counseling for:

- Obesity
- Sexually transmitted infection (STI) prevention (for adolescents at higher risk)

Immunizations:

From birth to age 18 — doses, recommended ages and recommended populations vary

- Diphtheria, pertussis, tetanus (DPT)
- Haemophilus influenzae type b
- Hepatitis A and B
- Human papillomavirus
- Inactivated poliovirus
- Influenza
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Rotavirus
- Varicella (chicken pox)

²Brand-name contraceptive drugs, methods or devices only covered with no member cost-sharing under certain limited circumstances when required by your doctor due to medical necessity.

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Policy forms issued in OK include: HMO OK COC-5 09/07, HMO/OK GA-3 11/01, HMO OK POS RIDER 08/07, GR-23 and/or GR-29/GR-29N.

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