

Minimum Essential Care (MEC) - Preventive Care Benefits

The Plan covers preventive and wellness services for eligible adults and children, and women's preventive services in compliance with the Affordable Care Act of 2010 (ACA), the regulations promulgated thereunder, and as amended from time.

In addition to the below, a description of preventive services can be found at the following websites:

<https://www.healthcare.gov/coverage/preventive-care-benefits/>
<https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations/>
<https://www.cdc.gov/vaccines/hcp/acip-recs/index.html>
https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
<https://www.hrsa.gov/womensguidelines/>

Recommended ages, frequency and populations are for example only. Coverage will be in accordance with current recommendations under the ACA or, if none, with reasonable medical judgment. Unless otherwise noted, frequency will be presumed to be annual.

Subject to the Plan's provisions, limitations and exclusions, the following are covered benefits when received at an In-Network Provider with no cost-sharing.

Preventive Care Services for Adults. Wellness or office exams billed by Physicians with the below services or with a covered preventive diagnosis are covered under the Plan. Charges for covered Preventive Services:

1. Abdominal aortic aneurysm one-time screening for men of specified ages who have ever smoked, ages 65-75.
2. Alcohol misuse screening and counseling, ages 18 and older.
3. Aspirin use to prevent cardiovascular disease for men and women of certain ages, ages 50-59.
4. Blood pressure screening for all adults, ages 18 and older.
5. Colorectal cancer screening for adults over 50.
6. Depression screening for adults.
7. Diabetes (Type 2) screening for adults with high blood pressure.
8. Hepatitis B screening for people at high risk, including people from countries with 2% or more Hepatitis B prevalence, and U.S.-born people not vaccinated as infants and with at least one parent born in a region with 8% or more Hepatitis B prevalence.
9. Hepatitis C screening for adults at increased risk, and one time for everyone born 1945-1965.
10. HIV screening everyone ages 15-65, and other ages at increased risk.
11. Immunization vaccines for adults.

(NOTE: Doses, recommended ages, and recommended populations vary):

- Diphtheria
 - Hepatitis A
 - Hepatitis B
 - Herpes Zoster
 - Human Papillomavirus
 - Influenza (Flu Shot)
 - Measles, Mumps, Rubella
 - Meningococcal
 - Pneumococcal
 - Tetanus, Diphtheria, Pertussis
 - Varicella (Chickenpox)
12. Lung cancer screening for adults 55-80 at high risk for lung cancer because they're heavy smokers or have quit in the past 15 years.
 13. Obesity screening and counseling.
 14. Sexually Transmitted Infection (STI) prevention counseling for adults at higher risk.

15. Syphilis screening for all adults at higher risk.
16. Tobacco use screening for all adults and cessation interventions for tobacco users.
17. Statin use for the primary prevention of cardiovascular disease in adults. The USPSTF recommends that adults without a history of cardiovascular disease (CVD) (eg, symptomatic coronary artery disease or ischemic stroke) use a low- to moderate-dose statin for the prevention of CVD events and mortality when all of the following criteria are met: 1) they are aged 40 to 75 years; 2) they have one or more CVD risk factors (ie, dyslipidemia, diabetes, hypertension, or smoking); and 3) they have a calculated 10-year risk of a cardiovascular event of 10% or greater.
18. Latent tuberculosis infection screening for asymptomatic adults at increased risk for infection.

Preventive Care Services for Children Wellness or office exams billed by Physicians with the below services or with a covered preventive diagnosis are covered under the Plan. Recommended Well Baby/Child Visit Schedule:

- Ages: 0 to 11 months – 6 visits
- Ages: 1 to 4 years – 7 visits
- Ages: 5 to 10 years – annual visits
- Ages: 11 to 14 years – annual visits
- Ages: 15 to 17 years – annual visits

Charges for covered Preventive Services:

1. Alcohol and Drug use assessments for adolescents.
2. Autism screening for Children at 18 and 24 months.
3. Behavioral assessments for Children (ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years).
4. Blood pressure screening for Children (ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years).
5. Depression screening for adolescents.
6. Developmental screening for Children under age 3.
7. Dyslipidemia screening for Children at higher risk of lipid disorders (ages: 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years).
8. Fluoride chemoprevention supplements for Children without fluoride in their water source.
9. Gonorrhea preventive medication for the eyes of all newborns.
10. Hearing screening for all newborns.

11. Height, Weight and Body Mass Index measurements for Children (ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years).
12. Hematocrit or Hemoglobin screening for all Children.
13. Hemoglobinopathies or sickle cell screening for newborns.
14. HIV screening for adolescents at higher risk.
15. Hypothyroidism screening for newborns.
16. Immunization vaccines for Children from birth through age 18. (NOTE: Doses, recommended ages, and recommended populations vary):
 - Diphtheria, Tetanus, Pertussis (Whooping Cough)
 - Haemophilus influenzae type b
 - Hepatitis A
 - Hepatitis B
 - Human Papillomavirus (PVU)
 - Inactivated Poliovirus
 - Influenza (Flu Shot)
 - Measles
 - Meningococcal
 - Pneumococcal
 - Rotavirus
 - Varicella (Chickenpox)
17. Lead screening for Children at risk of exposure.
18. Medical history for all Children throughout development (ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years).
19. Obesity screening and counseling.
20. Oral health risk assessment for young Children (ages: 0 to 11 months, 1 to 4 years, 5 to 10 years).
21. Phenylketonuria (PKU) screening for newborns.
22. Sexually Transmitted Infection (STI) prevention counseling and screening for adolescents at higher risk.
23. Tuberculin testing for Children at higher risk of tuberculosis (ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years).
24. Vision screening for all Children.

Preventive Care Services for Women (Including Pregnant Women or Women Who May Become Pregnant).

Wellness or office exams billed by Physicians with the below services or with a covered preventive diagnosis are covered under the Plan annually or as needed to include pre-natal visits.

Charges for covered Preventive Services as listed below:

1. Breast cancer genetic test counseling (BRCA) counseling for women at higher risk.
2. Breast cancer mammography screenings every 1 to 2 years for women over 40.
3. Breast cancer chemoprevention counseling for women at higher risk.
4. Breastfeeding comprehensive support and counseling from trained providers, as well as access to breastfeeding supplies for pregnant and nursing women.
5. Cervical cancer screening for sexually active women.
6. Chlamydia infection screening for younger women and other women at higher risk.
7. Contraception: Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, as prescribed by a health care provider for women with reproductive capacity (not including abortifacient drugs used for nonsurgical abortions). This does not apply to health plans sponsored by employers who have religious and/or moral objections to covering contraceptives.
8. Depression screening for women during pregnancy and in the postpartum period.
9. Domestic and interpersonal violence screening and counseling for all women.
10. Folic acid supplements for women who may become pregnant.
11. Gestational diabetes screening for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes.
12. Gonorrhea screening for all women at higher risk.
13. Hepatitis B screening for pregnant women at their first prenatal visit.
14. Human Immunodeficiency Virus (HIV) screening and counseling for sexually active women.
15. Human Papillomavirus (HPV) DNA test every 3 years for women with normal cytology results who are 30 or older.
16. Osteoporosis screening for women over age 60 depending on risk factors.
17. Rh incompatibility screening for all pregnant women and follow-up testing for women at higher risk.
18. Sexually Transmitted Infections (STI) counseling for sexually active women.
19. Syphilis screening for all pregnant women or other women at increased risk.
20. Tobacco use screening and interventions for all women, and expanded counseling for pregnant tobacco users.
21. Screening for asymptomatic bacteriuria in pregnant women at 12 to 16 weeks' gestation or at their first prenatal visit, if later.
22. Well-woman visits to get recommended services for women under 65.
23. Preeclampsia screening in pregnant women with blood pressure measurements throughout pregnancy.

The Minimum Essential Coverage plan is not underwritten by AXIS Insurance Company, it is a self-funded plan offered by the Employer.

