What is considered a "preventive service?"

Adult Routine Physical

This health plan covers routine physical exams furnished by a General Hospital, Community Health Center, Physician, Nurse Practitioner, Nurse Midwife or Independent Lab for the number of exams described in the benefit limit. These covered services include:

- Routine medical exams
- Immunizations (including flu shots and travel immunizations)
- Related lab tests and x-rays
- Blood tests to screen for lead poisoning
- One baseline mammogram during the 5-year period a member is age 35 thru 39, and one mammogram for each member in each calendar year for a member age 40 or older
- One routine PSA (prostate-specific antigen) blood test each calendar year for a member age 40 or older
- A sigmoidoscopy or barium enema once every 3 years for a member age 50 or older
- A colonoscopy once every 10 years for a member age 50 or older (effective 1/1/2010)
- Other related routine services furnished in accordance with Blue Cross Blue Shield guidelines.

Note: The benefit limit for routine exams does not apply to immunizations. If there is a routine exam charge during the same visit, the benefit limit applies **only to the routine exam (and other covered related services).**

What is considered a "preventive service?" (Continued....)

Pediatric Routine Physical

This health plan covers routine pediatric care furnished by a General Hospital, Community Health Center, Physician, Nurse Practitioner or Independent Lab in accordance with the age-based schedule described in this section. These covered services include:

- Routine medical exams, including history, measurements, sensory screening and neuropsychiatric evaluation and development screening and assessment
- · Hereditary and metabolic screening at birth
- Appropriate immunizations (including flu shots and travel immunizations)
- Tuberculin tests
- Hematocrit, hemoglobin and other appropriate blood tests, such as blood tests to screen for lead poisoning
- Urinalysis
- Other related routine services furnished in accordance with Blue Cross Blue Shield guidelines

These preventive health benefits are provided based on the following age-based schedule:

- 10 visits during the first year of life (birth to age one). These 10 visits include inpatient pediatric care for a well newborn
- 3 visits during the second year of life (age one to age two)
- One visit each calendar year from age two through age 18.

Note: The age-based schedule does not apply to immunizations. If there is a routine exam charge during the same visit, the age-based schedule applies only to the routine exam (and other related services).