



Keep your health in check

Preventive care coverage at no extra cost

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

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90.03.401.1 B (9/20)



You're covered

Preventive care services* are covered at no extra cost through your health benefits and insurance plan when you see a physician or provider in your plan's network.

We've got you covered with no cost share**

Coverage includes routine screenings and checkups, as well as some counseling to prevent illness, disease and other health problems.

Many of these services are covered as part of physical exams. You won't have to pay out of pocket for these preventive visits when they are provided in network. They include:



**Regular checkups
for adults**



**Routine gynecological
exams for women**



**Wellness exams
for children**

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

Aetna follows preventive recommendations as determined by the U.S. Preventive Services Task Force, Centers for Disease Control and Prevention and other advisory committees. Screenings, services and other covered preventive services can vary by age, gender and other factors. Be sure to talk with your doctor about which services are right for you.

*Employers 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.

**Preventive care at no cost share covered in accordance with the Affordable Care Act.



Covered preventive services for adults commonly include:

Screenings for:

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Cholesterol (for adults of certain ages or at higher risk)
- Colorectal cancer*
- Depression
- Diabetes
- Hepatitis B and C
- High blood pressure
- Home blood pressure monitor (one monitoring device per member age 18 and over)
- Human immunodeficiency virus (HIV)
- Lung cancer* (for adults with a history of smoking)
- Obesity
- Prostate cancer*
- Syphilis (for pregnant women and members at higher risk)
- Tobacco use
- Tuberculosis (TB) testing

Medicine and supplements

Doses, recommended ages and recommended populations vary.

- Aspirin for women at risk of preeclampsia and adults ages 50–69 with certain heart risk factors*
- Bowel preparation medication (for preventive colorectal cancer screening)
- HIV pre-exposure prophylaxis (PrEP) medication for members at higher risk
 - Truvada (until a generic version is available)
 - Descovy — covered for members with renal comorbidities or bone disease
- Low-dosage statins: dependent on cardiovascular disease (CVD) and risk factors
- Tobacco-cessation medicine approved by the U.S. Food and Drug Administration (FDA), including over-the-counter medicine when prescribed by a health care provider and filled at a participating pharmacy

Counseling for:

- Alcohol misuse
- Domestic violence
- Nutrition (for adults with 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.

- Hepatitis A and B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza (flu)
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Tetanus, diphtheria, pertussis (Tdap)
- Varicella (chickenpox)

*Subject to age restrictions.



Covered preventive services for women commonly include:

Screenings and counseling for:

- Breast cancer (BRCA) gene counseling and genetic testing for members at a higher risk
- Breast cancer chemoprevention for members at a higher risk
- Breast cancer mammography*
- Cervical cancer*
- Chlamydia infection*
- Gonorrhea
- Interpersonal or domestic violence
- Osteoporosis* (depending on risk factors)

Medicine and supplements:

- Breast cancer risk-reducing medicine, such as tamoxifen, raloxifene, exemestane and anastrozole, for women with an increased risk*
- Folic acid supplements (for women of childbearing ages)

Counseling and services**:

- Prescribed FDA-approved over-the-counter or generic female contraceptives*** when filled at a network pharmacy
- Two visits a year for patient education and counseling on contraceptives
- Voluntary sterilization services

Covered preventive services for pregnant women:

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

Covered preventive supplies for pregnant women:

- Breast pump supplies (one set per birth)
- Certain standard electric breastfeeding pumps (nonhospital grade) anytime during pregnancy or while you are breastfeeding (one per birth)
- Manual breast pump anytime during pregnancy or after delivery for the duration of breastfeeding

*Subject to age restrictions.

**Certain eligible religious employers and organizations may choose not to cover contraceptive services as part of the group health coverage.

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

†Limits may vary depending upon state requirements and applicability.



Covered preventive services for children commonly include:

Screening and assessments* for:

- Adolescent depression screening
- Alcohol and drug use
- Anemia
- Attention deficit disorder (ADD)
- Autism
- Behavioral and psychological issues
- Congenital hypothyroidism
- Development
- Hearing
- Height, weight and body mass index
- Hematocrit or hemoglobin
- Hemoglobinopathies or sickle cell
- Hepatitis B
- HIV
- Lead (for children at risk for exposure)
- Lipid disorders (dyslipidemia screening for children at higher risk)
- Medical history
- Newborn blood screenings
- Obesity
- Oral health (risk assessment)
- STIs
- TB testing
- Vision

Medicine and supplements:

- Gonorrhea preventive medicine for the eyes of all newborns
- Oral fluoride for children* (prescription supplements for children without fluoride in their water source)
- Topical application of fluoride varnish by primary care providers

Counseling for:

- Obesity
- STI prevention (for adolescents at higher risk)

Immunizations

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

- *Haemophilus influenzae* type B
- Hepatitis A and B
- HPV
- Inactivated poliovirus
- Influenza
- Meningococcal (meningitis)
- MMR
- Pneumococcal (pneumonia)
- Rotavirus
- Tdap/diphtheria, tetanus, pertussis (DTaP)
- Varicella (chickenpox)

*Subject to age restrictions.

Exclusions and limitations

This plan does not cover all health care expenses and includes exclusions and limitations. Members should refer to their plan documents to determine which health care services are covered and to what extent.

Ask your health care provider about which preventive services are right for you and your family.

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