

Check the health benefit for specific preventive care coverage.

| TOPIC  | 19-39 yrs.     | 40-49 yrs.     | 50-64 yrs.     | 65+ yrs.       |
|--|----------------|----------------|----------------|----------------|
| <b>PERIODIC VISIT/LAB/TESTS/OTHER EXAMS</b>  |                |                |                |                |
| Every 1-3 yrs. (based on age)  | Always         | Always         | Always         | Always         |
| Complete or update family history  | Always         | Always         | Always         | Always         |
| Height and weight - body mass index (BMI)  | Always         | Always         | Always         | Always         |
| Blood pressure   | Always         | Always         | Always         | Always         |
| Vision screening: as needed  | Always         | Always         | Always         | Always         |
| Hepatitis C screening  | Always         | Always         | Always         | Always         |
| Hepatitis B screening: at first prenatal visit if pregnant; others if at risk  | Always         | Always         | At Risk        | At Risk        |
| HIV testing*: age 15-65 and pregnant women; older if at risk   | Always         | Always         | Always         | At Risk        |
| Lipid screening: frequency based on age, family history, and risk factors  | Always         | Always         | Always         | Always         |
| Cervical cancer screening: Pap test every 3 yrs. ages 21-65, or can opt for pap test with HPV test every 5 yrs. or HPV test alone every 5 yrs. starting at age 30  | Always         | Always         | Always         | Not applicable |
| Chlamydia screening: pregnant and sexually active women age 24 and younger; older if at risk   | Always         | At Risk        | At Risk        | At Risk        |
| Gonorrhea screening: pregnant and sexually active women age 24 and younger; older if at risk   | Always         | At Risk        | At Risk        | At Risk        |
| Syphilis screening: if pregnant; others if at risk   | At Risk        | At Risk        | At Risk        | At Risk        |
| Rubella antibody screening: if pregnant  | Always         | Always         | Not applicable | Not applicable |
| Mammogram Screening: every 2 yrs. ages 50-74, younger if at risk; prescription required  | At Risk        | At Risk        | Always         | Always         |
| TB screening   | At Risk        | At Risk        | At Risk        | At Risk        |
| Type 2 diabetes screening: starting at age 45; younger if at risk  | At Risk        | Always         | Always         | Always         |
| Colorectal cancer screening: beginning at age 50 until age 75, younger or older based on risk  | Not applicable | At Risk        | Always         | Always         |
| <ul style="list-style-type: none"> <li>Fecal occult blood/FIT (annually) or</li> <li>FIT DNA (every three yrs.) or</li> <li>Sigmoidoscopy (every 5 yrs.) or with FIT every 10 yrs. or</li> <li>Colonoscopy (every 10 yrs.) or</li> <li>CT colonography (every 5 yrs.)</li> </ul> | Not applicable | At Risk        | Always         | Always         |
| Osteoporosis screening/bone density testing: starting at age 65; younger if at risk  | At Risk        | At Risk        | At Risk        | Always         |
| <b>IMMUNIZATIONS (check footnotes on CDC current schedule)</b>   |                |                |                |                |
| Tetanus, diphtheria, pertussis (Tdap or Td**): get Tdap vaccine once, the Td booster every 10 yrs.   | Always         | Always         | Always         | Always         |
| Influenza vaccine annually   | Always         | Always         | Always         | Always         |
| Pneumococcal vaccines: ages 65 yrs. or older; younger if at risk   | At Risk        | At Risk        | At Risk        | Always         |
| Zoster (shingles) vaccines: 2 doses RZV age 50 and older   | Not applicable | Not applicable | Always         | Always         |
| Meningococcal vaccines: if at risk or based on individual clinical decision  | At Risk        | At Risk        | At Risk        | At Risk        |
| Varicella (chickenpox) vaccine: 2 doses if didn't receive vaccine as a child   | Always         | Always         | Always         | Always         |
| Hep A vaccine: if at risk, 2 to 3 doses depending on vaccine   | At Risk        | At Risk        | At Risk        | At Risk        |
| Hep B vaccine: if at risk, 2 to 3 doses depending on vaccine   | At Risk        | At Risk        | At Risk        | At Risk        |
| MMR vaccine: if a risk or born in 1957 or after, speak with provider regarding how many doses needed   | At Risk        | At Risk        | At Risk        | At Risk        |
| HPV vaccine: 2 to 3 doses, ages 19-26 if not previously vaccinated   | Always         | Not applicable | Not applicable | Not applicable |
| Haemophilus influenza type b (Hib) 1 or 3 doses depending on indication  | At Risk        | At Risk        | At Risk        | At Risk        |

Always    At Risk    Not applicable

\* New York State law requires HIV testing to be offered to all individuals who access care. Pregnant women also require repeat testing in the third trimester.

\*\* The American College of Obstetricians and Gynecologists also recommends Tdap for pregnant women in the third trimester.

BlueCross BlueShield of Western New York is a division of HealthNow New York Inc., an independent licensee of the Blue Cross and Blue Shield Association. BCBSWNY complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística, Llame al 1-833-735-4515 (TTY 711) 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-833-735-4515 (TTY 711)

| TOPIC  | 19-39<br>yrs. | 40-49<br>yrs. | 50-64<br>yrs. | 65+<br>yrs. |
|--|---------------|---------------|---------------|-------------|
| <b>COUNSELING/SCREENING</b>  |               |               |               |             |
| Exercise promotion   | Always        | Always        | Always        | Always      |
| Smoking cessation: if applicable   | Always        | Always        | Always        | Always      |
| Alcohol/substance abuse  | Always        | Always        | Always        | Always      |
| STD/HIV/sexual behavior  | Always        | Always        | Always        | Always      |
| Family planning  | Always        | Always        | At Risk       | At Risk     |
| Dental health  | Always        | Always        | Always        | Always      |
| Sun exposure/skin cancer   | Always        | Always        | Always        | Always      |
| Injury prevention, including seat belts, helmet use, falls                     | Always        | Always        | Always        | Always      |
| Life-stage issues, including family, caregiving, and bereavement               | Always        | Always        | Always        | Always      |
| Health care proxy/advance directives   | Always        | Always        | Always        | Always      |
| OTC drugs including vitamins and holistic medical review                       | Always        | Always        | Always        | Always      |
| Aspirin therapy: adults ages 50-59 yrs. at high-risk for CVD, older if at risk | At Risk       | At Risk       | At Risk       | At Risk     |
| Workplace violence   | Always        | Always        | Always        | Always      |
| Domestic violence  | Always        | Always        | Always        | Always      |
| Risk-taking behavior   | Always        | Always        | Always        | Always      |
| Stress management  | Always        | Always        | Always        | Always      |
| Nutrition  | Always        | Always        | Always        | Always      |
| Bladder control  | At Risk       | At Risk       | At Risk       | At Risk     |
| Depression screening   | Always        | Always        | Always        | Always      |
| Statins use: adults ages 40-75 yrs. if appropriate based on risk               | At Risk       | At Risk       | At Risk       | At Risk     |

Always    At Risk    Not applicable

★ Provide culturally and linguistically appropriate services. ★

These tools were developed by BlueCross BlueShield of Western New York following Centers for Disease Control and Prevention (CDC) and Advisory Committee on Immunization Practices (ACIP) recommendations.

Please refer to the CDC and/or the ACIP websites for details.

These recommendations do not indicate an exclusive course of treatment or standard of care. Variations, taking into account individual circumstances, may be appropriate.

BlueCross BlueShield of Western New York is a division of HealthNow New York Inc., an independent licensee of the Blue Cross and Blue Shield Association. BCBSWNY complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística, Llame al 1-833-735-4515 (TTY 711) 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-833-735-4515 (TTY 711)

Y0086\_UCD236\_C