Preventive Health Services
Covered in full under Federal Health Care Reform

Preventive health services can help you avoid illness and improve your health. Listed below is a summary of the preventive health services that are to be fully covered as part of health care reform (the Patient Protection and Affordable Care Act, or ACA). In addition to ACA-covered preventive services, New York State has mandated services that are fully covered.¹

You do not have to pay for these services when you get them from an MVP-participating (in-network) health care provider and the primary purpose of the office visit is to receive one of these preventive services.

**Covered Preventive Services for Adults**

- Abdominal Aortic Aneurysm—one-time screening for men of specified ages who have ever smoked
- Alcohol misuse screening and counseling
- Aspirin use to prevent cardiovascular disease for men and women of certain ages
- Blood pressure screening
- Cholesterol screening for adults of certain ages or those who are at higher risk
- Colorectal Cancer screening for adults over 50
- Depression screening
- Type 2 Diabetes screening
- Diet counseling for adults at higher risk for chronic disease
- HIV screening for everyone ages 15 to 65, and other ages at increased risk
- Hepatitis screening
- Hepatitis C screening for adults at increased risk, and one time for everyone born 1945–1965
- Immunization vaccines for adults—doses, recommended ages and recommended populations vary: Diphtheria, Hepatitis A, Hepatitis B, Herpes Zoster, Human Papillomavirus (HPV), Influenza (flu shot), Measels, Meningococcal, Mumps, Pertussis, Pneumococcal, Rubella, Tetanus, Varicella
- 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
- Obesity screening and counseling
- Sexually Transmitted Infection (STI) prevention counseling for adults at higher risk
- Syphilis screening for all adults at higher risk
- Tobacco use screening for all adults and cessation interventions for tobacco users

**Covered Preventive Services for Women, Including Pregnant Women**

- Anemia screening as part of a well visit
- Breast Cancer Diagnostic imaging—NYS mandate includes preventive service coverage for Breast Cancer prevention and treatment, which requires screening and diagnostic imaging for the detection of Breast Cancer, diagnostic mammograms, breast ultrasound, or Magnetic Resonance Imaging (MRI)
- Breast Cancer genetic test counseling (BRCA) for women at higher risk
- Breast Cancer Mammography screenings every 1 to 2 years for women over age 40
- Breast Cancer Chemoprevention counseling for women at higher risk
- Breastfeeding comprehensive support and counseling
- Cervical Cancer screening for sexually active women
- Chlamydia Infection screening for younger women and other women at higher risk
- Contraceptive methods and counseling to prevent unintended pregnancies, as prescribed²
- Domestic and interpersonal violence—screening and counseling
- Folic Acid supplements for women who may become pregnant
- Gestational Diabetes screening for women 24–28 weeks pregnant and those at high risk of developing Gestational Diabetes
- Gonorrhea screening for all women at higher risk
- Hepatitis B screening for pregnant women at their first prenatal visit
- HIV screening and counseling for sexually active women, annually

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Covered Preventive Services for Women, Including Pregnant Women (continued)

- Human Papillomavirus (HPV), DNA test every 5 years for women with normal cytology results who are age 30 or older
- Osteoporosis screening for women over age 60 depending on risk factors
- Rh Incompatibility screening for all pregnant women and follow-up testing for women at higher risk
- Sexually transmitted infections counseling for sexually active women, annually
- Syphilis screening for women at increased risk
- Expanded tobacco intervention and counseling for pregnant tobacco users
- Urinary tract or other infection screening
- Well-woman visits to get recommended services for women under age 65

Covered Preventive Services for Children

- Alcohol and drug use assessments for adolescents
- Autism screening for children at 18–24 months
- Behavioral assessments for children of all ages
- Blood pressure screening for children of all ages
- Cervical Dysplasia screening for sexually active females
- Depression screening for adolescents
- Developmental screening for children under age 3
- Dyslipidemia screening for children at higher risk of lipid disorders
- Fluoride Chemoprevention supplements for children without fluoride in their water source
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening for all newborns
- Height, weight and Body Mass Index (BMI) measurements for children of all ages
- Hematocrit or Hemoglobin screening for children
- Hepatitis B screening
- Hemoglobinopathies or sickle cell screening for newborns
- HIV screening for adolescents at higher risk
- Hypothyroidism screening for newborns
- Immunization vaccines for children from birth to age 18—doses, recommended ages, and recommended populations vary: Diphtheria, Tetanus, Pertussis, Haemophilus Influenzae Type B, Hepatitis A, Hepatitis B, Human Papillomavirus (HPV), Inactivated Poliovirus, Influenza (flu shot), Measles, Meningococcal, Pneumococcal, Rotavirus, Varicella (Chickenpox)
- Lead screening for children at risk of exposure
- Medical History for all children throughout development
- Obesity screening and counseling
- Oral health risk assessment for young children
- Phenylketonuria (PKU) screening for newborns
- Sexually Transmitted Infection (STI) prevention counseling and screening for adolescents at higher risk
- Tuberculin testing for children at higher risk of Tuberculosis
- Vision screening for all children

Learn more detailed information on these preventive services at

www.healthcare.gov/what-are-my-preventive-care-benefits

1. This document applies to MVP fully-insured plans. Grandfathered and ASO (self-funded) group plans may not be subject to these requirements. This document is intended to provide a general outline regarding preventive services. Also, a member’s coverage may include other preventive services in addition to those required by law. Please refer to the member’s plan documents for the specific terms of coverage. This information should not be construed as legal or tax advice or as a recommendation of any kind regarding health care reform.

2. MVP will pay 100% of the cost for covered generic and single source brand contraceptive drugs. Multi-source brand contraceptive drugs will require the member payment of the generic-brand difference in cost.

Health benefit plans are issued or administered by MVP Health Plan, Inc.; MVP Health Insurance Company; MVP Select Care, Inc.; and MVP Health Services Corp., operating subsidiaries of MVP Health Care, Inc. Not all plans available in all states and counties.