



BCBSWY Preventive Care Benefits

Please note that the preventive care benefits illustrated below are only applicable for certain types and lines of business and become effective, if applicable, for plan years beginning on or after September 23rd, 2010. Please refer to the Preventive Care section in your benefit document. If the Preventive Care definition includes the preventive health services recommended by the U.S. Preventive Services Task Force (USPSTF) (A and B rated only), the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP), and the Health Resources and Services Administration (HRSA), then the below outlined preventive care benefits would be applicable.

These benefits meet the criteria outlined in the Patient Protection and Affordable Care Act (PPACA) for wellness and preventive benefits. In addition these benefits meet the definition of comprehensive adult wellness benefits in the Wyoming Health Insurance Code. Benefits OTHER than those outlined below will not be covered as a preventive or wellness benefit.

Services must be done by a Participating Provider (Wyoming Choice Provider for Wyoming Choice Network products) or Health Fair. Non-participating / non-network services are not covered.

The following services are covered preventive services – Deductible and coinsurance are waived:

- Well Child Care to the Participant's 6th Birthday:
 - Birth through 12 months – 7 visits
 - 13 months through 35 months – 4 visits
 - 36 months through 72 months – 1 visit per calendar year
 - Visual impairment under age 5 – 1 visit per calendar year
 - Immunizations as recommended by the CDC
 - Congenital hypothyroidism screening under age 1
 - Hearing loss screening up to 1 month of age
 - Phenylketonuria (PKU) screening – once per lifetime ages 0 – 1 years old
 - Sickle cell disease screening – up to age 1
 - Iron deficiency anemia prevention for children at risk 6 to 12 months

The information provided in this document is not intended to advise you on how to comply with any provisions of the referenced legislation or related legislation or regulations, nor is it otherwise intended to impart any legal advice. If you have any questions about how to comply with this or any other law or regulation, we recommend that you consult with your legal counsel.



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- Participants Age 6 and Older:
 - Routine Physical examination (office visit) – 1 per calendar year
 - Adult aortic aneurysm screening for male participants ages 65-75– lifetime maximum of 1 screening
 - Alcohol misuse screening and behavioral counseling intervention – 1 visit per calendar year
 - Asymptomatic bacteriuria screening – pregnant women only
 - Hepatitis B virus infection screening – pregnant women only
 - Rh (D) incompatibility screening – pregnant women only
 - Lipid disorders screening once every 5 calendar years – men age 35 and older, women age 45 and older unless at risk for CAD then 20 and older for both men and women
 - Osteoporosis screening once every 2 calendar years – females age 65 and older unless at risk, then 60 and older
 - Iron deficiency anemia screening – pregnant women only
 - Sexually transmitted disease (STD) screening:
 - Chlamydial infection screening – women only
 - Gonorrhea infection screening – women only
 - Syphilis infection screening – pregnant women and men and women at risk
 - Diagnostic screening procedure for HIV testing for at risk participants and pregnant women
 - Type 2 diabetes mellitus screening
 - Immunizations as recommended by the CDC
 - Colorectal cancer screening for members age 50 through 75:
 - Fecal occult blood test – 1 per calendar year
 - Colonoscopy (including related services) – 1 every 10 years OR
 - Sigmoidoscopy (including related services) – 1 every 5 years
 - Cervical cancer screening and related office visit – 1 per calendar year
 - PSA test – 1 per calendar year for subscriber and spouse only
 - Mammogram Screenings – 1 per calendar year for subscriber and spouse only
 - Tobacco cessation counseling – 8 visits per calendar year



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- Prescription Drugs* - must be filled as a prescription and submitted through the prescription drug card program.
 - Aspirin – limited to 81 mg only
 - Ages 45 – 79 for males
 - Ages 55 – 79 for females
 - Folic acid (non prenatal) – limited to 0.4 – 0.8 mg only
 - Women only
 - Oral fluoride – over the counter or prescription strength
 - Children age 6 months- 6 years when sufficient fluoride is lacking in available drinking water
 - Iron supplements
 - Children ages 6 – 12 months and at risk for anemia
 - Tobacco cessation – up to a 180 day supply
 - Non-nicotine replacement therapy (pills)
 - Over the counter nicotine replacement therapy (lozenges, patch and gum)
 - Prescription nicotine replacement therapy (nasal spray and inhalers)
 - Vitamin D supplementation for community-dwelling adults aged 65 years or older who are at increased risk for falls

*Brand Drugs – If the participant chooses a brand drug when a generic drug is available, the participant must pay the difference in cost between the brand and the generic drug.