

# PREVENTIVE CARE RECOMMENDATIONS



Talk with your primary care provider about these preventive services.

How often and what kind of preventive care services you need depends on your age, gender, health and family history. Your provider may recommend additional tests, which may or may not be covered under your plan. Check your health plan benefits or call the number on the back of your member ID card for details on coverage.\*

■ Men and women    ■ Women only

HEALTHY ADULT GUIDELINES					
AGE	21 – 39	40 – 49	50 – 64	65 – 74	75+
<b>CARDIOVASCULAR HEALTH</b>					
<b>Advice on nutrition, healthy weight and physical activity</b>	Throughout adulthood				
<b>Advice on avoiding tobacco exposure and use</b>	Throughout adulthood				
<b>Blood pressure measurement</b>	At least annually				
<b>Cholesterol (lipid) screening</b>	Performed depending on risk				
<b>Diabetes screening</b>	Ages 40 – 70 and adjusted by health care provider based on risk				
<b>CANCER PREVENTION</b>					
<b>Breast cancer screening</b> (2D and 3D mammograms may be covered)			Age 50 – 74, every 2 years. May start earlier and be performed more frequently depending upon risk. Discuss your risk with your doctor.		
<b>Colorectal cancer screening</b> (Stool test, flexible sigmoidoscopy, colonoscopy) Frequency depends on type of test and risk factors			Age 50 – 74. May start younger if at risk.		
<b>Cervical cancer screening</b>	Age 21 – 29: PAP test every 3 years Age 30 – 65: PAP test every 3 years or if high-risk, human papillomavirus (HPV) every 5 years or HPV with PAP test every 5 years				
<b>Lung cancer screening</b>			Age 55 – 80: Low-dose CT scan, depending on smoking history, as determined by health care provider		
<b>SAFETY</b>					
<b>Intimate partner violence and elder abuse</b>	All women of childbearing age and vulnerable adults				
<b>Information on safety and injury prevention</b>	Throughout adulthood				

## HEALTHY ADULT GUIDELINES

AGE	21 – 39	40 – 49	50 – 64	65 – 74	75+
<b>OTHER</b>					
<b>Immunizations</b> (vaccines)	See Immunization Schedules at <a href="https://www.cdc.gov/vaccines/schedules">cdc.gov/vaccines/schedules</a>				
<b>Osteoporosis (bone density) screening</b>	Start at age 55 or based on risk assessment by health care provider for postmenopausal women.				
<b>Hepatitis C screening</b>	People born between 1945 and 1965 and those at high risk for infection				
<b>Chlamydia test</b>	Start before age 25, annually, if sexually active. Screen age 25 and older, depending upon risk assessment.				
<b>Advice on sexual health</b>	Throughout adulthood				
<b>Human immunodeficiency virus (HIV) screening</b>	Once for everyone, repeat screenings depending upon risk assessment by health care provider				
<b>Depression screening</b>	Throughout adulthood				
<b>Drug and/or alcohol use screening and prevention</b>	Throughout adulthood				

Child and adolescent

## HEALTHY CHILD AND ADOLESCENT GUIDELINES

AGE	0 – 2	3 – 5	6 – 12	13 – 17	18 – 20
<b>Advice on nutrition, healthy weight, physical activity and oral health</b>	Each well-child visit or annually				
<b>Immunizations</b> (vaccines)	See immunization schedules at <a href="https://www.cdc.gov/vaccines/schedules">cdc.gov/vaccines/schedules</a>				
<b>Development and mental health screening</b> – includes autism and depression	Development and mental health assessment. Surveillance throughout lifetime.				
<b>Hearing and vision screening</b>	Annually				
<b>Advice on safety and injury prevention</b> – includes advice on bullying, use of helmets during athletic activities, and seat belt use	Each well-child visit or annually. Helpful advice for caregivers available at <a href="https://www.healthychildren.org">healthychildren.org</a> .				
<b>Advice on avoiding tobacco and risk of second hand smoke exposure</b>	Each well-child visit or annually				
<b>Lead exposure screening and testing</b>	Discuss exposure risk with provider				
<b>Cholesterol (lipid) screening</b> Consider family history or other risks; discuss with provider				Age 9 to 11	
<b>Advice on sexual health and development</b> – testing for chlamydia and other sexually transmitted infections, as needed				Pediatricians can provide counseling and education and administer tests as necessary	

## HEALTHY PREGNANCY GUIDELINES

<b>Advice on abstaining from alcohol and tobacco</b>
<b>Advice on nutrition, healthy weight and physical activity</b>
<b>Advice on breastfeeding</b>
<b>Gestational diabetes mellitus (GDM) test</b>
<b>Infection screening tests</b> (group B strep, hepatitis B, HIV, syphilis and others)
<b>Anemia and Rh compatibility test</b>

\*Not all items on this list are covered benefits for all individuals or all products or groups with Blue Cross or Blue Plus. Inclusion of a service or items on this list does not guarantee coverage. Additional requirements may apply. Tests ordered during a preventive care visit that are not considered preventive care may be subject to deductibles, copays and/or coinsurance. Additionally, treatment or tests for an existing condition or illness are not preventive care and are subject to deductibles, copays and/or coinsurance.

**NOTICE OF NONDISCRIMINATION PRACTICES**  
**Effective July 18, 2016**

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or gender. Blue Cross does not exclude people or treat them differently because of race, color, national origin, age, disability, or gender.

Blue Cross provides resources to access information in alternative formats and languages:

- Auxiliary aids and services, such as qualified interpreters and written information available in other formats, are available free of charge to people with disabilities to assist in communicating with us.
- Language services, such as qualified interpreters and information written in other languages, are available free of charge to people whose primary language is not English.

If you need these services, contact us at 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711.

If you believe that Blue Cross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or gender, you can file a grievance with the Nondiscrimination Civil Rights Coordinator

- by email at: [Civil.Rights.Coord@bluecrossmn.com](mailto:Civil.Rights.Coord@bluecrossmn.com)
- by mail at: Nondiscrimination Civil Rights Coordinator  
Blue Cross and Blue Shield of Minnesota and Blue Plus  
M495  
PO Box 64560  
Eagan, MN 55164-0560
- or by phone at: 1-800-509-5312

Grievance forms are available by contacting us at the contacts listed above, by calling 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711. If you need help filing a grievance, assistance is available by contacting us at the numbers listed above.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights

- electronically through the Office for Civil Rights Complaint Portal, available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
- by phone at:  
1-800-368-1019 or 1-800-537-7697 (TDD)
- or by mail at:  
U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Room 509F  
HHH Building  
Washington, DC 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

This information is available in other languages. Free language assistance services are available by calling the toll free number below. For TTY, call 711.

Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al 1-855-903-2583. Para TTY, llame al 711.

Yog tias koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-793-6931. Rau TTY, hu rau 711.

Haddii aad ku hadasho Soomaali, adigu waxaad heli kartaa caawimo luqad lacag la'aan ah. Wac 1-866-251-6736. Markay tahay dad maqalku ku adag yahay (TTY), wac 711.

နမ့်ကတိကညိကျိန်ဒီး, တၢ်ကဟ့ၣ်နၢကျိန်တၢ်မၤစၢၤကလိတဖၣ်န့ၣ်လီၤ. ကိး 1-866-251-6744 လၢ TTY  
အဂီၢ်, ကိး 711 တက့ၢ်.

إذا كنت تتحدث العربية، تتوفر لك خدمات المساعدة اللغوية المجانية. اتصل بالرقم 1-866-569-9123. للهاتف النصي  
اتصل بالرقم 711.

Nếu quý vị nói Tiếng Việt, có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Gọi số 1-855-315-4015. Người dùng TTY xin gọi 711.

Afaan Oromoo dubbattu yoo ta'e, tajaajila gargaarsa afaan hiikuu kaffaltii malee. Argachuuf 1-855-315-4016 bilbilaa. TTY dhaaf, 711 bilbilaa.

如果您說中文，我們可以為您提供免費的語言協助服務。請撥打 1-855-315-4017。聽語障專 (TTY)，請撥打 711。

Если Вы говорите по-русски, Вы можете воспользоваться бесплатными услугами переводчика. Звоните 1-855-315-4028. Для использования телефонного аппарата с текстовым выходом звоните 711.

Si vous parlez français, des services d'assistance linguistique sont disponibles gratuitement. Appelez le +1-855-315-4029. Pour les personnes malentendantes, appelez le 711.

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한국어를 사용하시는 경우, 무료 언어 지원 서비스가 제공됩니다. 1-855-904-2583 으로 전화하십시오. TTY 사용자는 711 로 전화하십시오.

ຖ້າເຈົ້າເວົ້າພາສາລາວໄດ້, ມີການບໍລິການຊ່ວຍເຫຼືອພາສາໃຫ້ເຈົ້າພຣີ. ໃຫ້ໂທຫາ 1-866-356-2423 ສໍາລັບ. TTY, ໃຫ້ໂທຫາ 711.

Kung nagsasalita kayo ng Tagalog, mayroon kayong magagamit na libreng tulong na mga serbisyo sa wika. Tumawag sa 1-866-537-7720. Para sa TTY, tumawag sa 711.

Wenn Sie Deutsch sprechen, steht Ihnen fremdsprachliche Unterstützung zur Verfügung. Wählen Sie 1-866-289-7402. Für TTY wählen Sie 711.

ប្រសិនបើអ្នកនិយាយភាសាខ្មែរមែន អ្នកអាចរកបានសេវាជំនួយភាសាឥតគិតថ្លៃ។ ទូរស័ព្ទមកលេខ 1-855-906-2583 ។ សម្រាប់ TTY សូមទូរស័ព្ទមកលេខ 711 ។

Diné k'ehjí yáníłt'i'go saad bee yát'i' éí t'áájíík'e bee níká'a'doowołgo éí ná'ahoot'i'. Kojí éí béesh bee hodíílnih 1-855-902-2583. TTY biniiyégo éí 711 jí' béesh bee hodíílnih.

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