

## Health Screenings

You should visit your health care provider from time to time, even if you are healthy. The purpose of these visits is to:

- · Screen for medical issues
- Assess your risk for future medical problems
- Encourage a healthy lifestyle
- Update vaccinations and other preventive care services
- Help you get to know your provider in case of an illness.

## **Routine tests and screenings**

Health screenings such as mammograms, colonoscopies, pap smears, cholesterol and blood pressure tests are effective means of spotting diseases before they get worse. In general, it's very important to stick to your schedule for these tests, which help give doctors early warnings if your health is changing.

## **Screenings and Important Visits:**

**Blood pressure** 

Colonoscopy

**Diabetes** 

**Mammogram** 

**HIV Testing** 

**Lung Cancer** 

**Pap Smear** 

**Lipid/Cholesterol** 



Plan pays 100 %
No deductible
When you choose a
in-network provider.

## Every Year, Every one!

- ✓ Flu vaccine
- Skin cancer screening
- BMI and weight evaluation
- Depression screening

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Preventative Care		
Benefit and Payment Provisions	In-Network	Out-of-Network
Routine Physical (I per calendar year) Gynecological Exam (I per calendar year) To avoid any possible Office Visit charges for Preventive Services you receive during the calendar year, you should have all Preventive Services performed during your Routine Physical or Gynecological Exam.		
Well Child Care visits as provided in the American Academy of Pediatrics Bright Futures Guidelines.	100% - no copay or deductible.	
Preventive Care Services as recommended with an A or B rating by the United States Preventive Services Task Force and preventive care and screenings for women as provided for in the comprehensive guidelines supported by the Health Resources and Services Administration.		Plan pays 60% of allowable charge after deductible.
Seasonal Flu Shot Vaccination		
Hearing exams (I per calendar year)	Plan pays 80%; 100% for hearing screenings for children; no deductible.	
DC guidelines	Plan pays 100%; no deductible.	
Pap smear (I per calendar year)	Plan pays 100%; no deductible.	
Routine mammograms (I per calendar year beginning at age 40) (covered as outlined by American Cancer Society.)	Plan pays 100%; no deductible.	
Family planning Infertility lab work Infertility treatment Benefits payable up to \$10,000 lifetime maximum.	Plan pays 50%; no deductible.	
Contraceptives: At least one method in each of the 18 categories of contraceptives described in the Women's Preventative Services Section of the SPD will be covered at no cost to the Participant; oral contraceptives are covered under the Prescription Drug Card Program.	Plan pays 100%; no copay or deductible.	