



PREVENTION MAKES GOOD HEALTH POSSIBLE

We cover the preventive services listed on this flier for all members enrolled in our commercial health plans.¹ The information in this brochure does not pertain to members enrolled in Medicare coverage. We cover the services listed on this flier with no copayment, coinsurance, or deductible in the following types of commercial health plans with contract effective dates that begin on or after January 1, 2017:

- All small group plans except grandfathered plans
- All large group plans other than grandfathered plans and retiree-only plans
- All grandfathered and retiree-only large group plans that choose to cover these services at no cost share and all grandfathered small group plans in California

This guide also includes information about additional services covered in certain states and Washington, D.C.

If you are enrolled in grandfathered coverage or retiree-only coverage, see your *Evidence of Coverage*, *Certificate of Insurance*, or *Membership Agreement*, or talk to your employer's benefits administrator for the coverage and cost share for preventive services.

What's new

There are benefit changes for 2017. Most of our plans will now cover the following services:

- Bowel preparation medications prescribed prior to a screening colonoscopy (will be covered for plan years or policy years beginning on or after January 1, 2017)
- Low-dose aspirin to prevent colorectal cancer (will be covered for plan years

or policy years beginning on or after May 1, 2017)

Preventive services for adults

- Abdominal aortic aneurysm screening (one time for men 65 to 75 who have ever smoked)
- Age-appropriate preventive medical examinations
- Annual lung cancer screening with low-dose computed tomography, and counseling, in adults 55 to 80 who are at high risk based on their current or past smoking history
- Blood pressure screening
- Cholesterol screening, if at higher risk of cardiovascular disease
- Colon cancer screening (for adults 50 to 75)
 - Bowel preparation medications prescribed prior to a screening colonoscopy (will be covered for plan years or policy years beginning on or after January 1, 2017)
 - Pre-consultation visit associated with colon cancer screening
 - Pathology exam on a polyp biopsy, performed in connection with colon cancer screening
- Depression screening
- Diabetes screening (type 2) for adults with abnormal blood glucose
- Discussions with primary care physician about:
 - Alcohol misuse screening and counseling
 - Low-dose aspirin use, if at high risk of cardiovascular disease or colorectal cancer
 - Diet, if at higher risk for chronic disease
 - Obesity and weight management, including intensive behavioral counseling for overweight adults at risk for cardiovascular disease
 - Sexually transmitted infections prevention
- Tobacco use cessation and counseling
- FDA-approved medications for tobacco cessation, including over-the-counter medications, when prescribed by a plan provider
- Hepatitis B screening (for adults at higher risk)
- Hepatitis C screening (for adults born between 1945 and 1965)
- Immunizations (doses, recommended ages, and recommended populations vary):
 - Hepatitis A
 - Hepatitis B
 - Herpes zoster
 - Human papillomavirus
 - Influenza
 - Measles, mumps, rubella
 - Meningococcal (meningitis)
 - Pneumococcal
 - Tetanus, diphtheria, pertussis
 - Varicella
- Over-the-counter drugs when prescribed by your doctor for preventive purposes:
 - Low-dose aspirin to reduce the risk of heart attack
 - Low-dose aspirin to prevent colorectal cancer (will be covered for plan years or policy years beginning on or after May 1, 2017)
 - Vitamin D supplementation to prevent falls in community-dwelling adults 65 years or older who are at increased risk for falls
- Physical therapy to prevent falls (in community-dwelling adults 65 and older who are at increased risk of falling)
- Routine physical exam
- Sexually transmitted infection screenings (for adults at higher risk)
 - Chlamydia
 - Gonorrhea
 - HIV
 - Syphilis

Additional preventive services for women²

- Anemia screening (for pregnant women)³
- BRCA genetic counseling to assess risk of carrying breast/ovarian cancer genes (for those who meet U.S. Preventive Services Task Force guidelines)
- BRCA genetic testing (for high-risk women and when services are ordered by a plan physician)
- Breastfeeding equipment
- Cancer screening:
 - Breast cancer (mammography for women 40 and older)
 - Cervical cancer (for women 21 to 65)
- Contraceptive devices and drugs (FDA-approved and prescribed by your doctor), contraceptive device removal, and female sterilizations
- Discussions with primary care physician about:
 - Breastfeeding and comprehensive lactation support
 - Chemoprevention for breast cancer (if at higher risk)
 - Contraceptive methods
 - Family history of breast and/or ovarian cancer
 - Folic acid supplements (if you may become pregnant)
 - Interpersonal and domestic violence
 - Preconception care
 - Tobacco use cessation and counseling for pregnant women
- FDA-approved medications for tobacco cessation for pregnant women, including over-the-counter medications, when prescribed by a plan provider⁴
- Gestational diabetes screening (for pregnant women at high risk, or women 24 and 28 weeks pregnant)
- Hepatitis B screening (for pregnant women at their first prenatal visit)
- HIV screening for pregnant women
- Low-dose aspirin (after 12 weeks

of gestation in women who are at high risk for preeclampsia)

- Osteoporosis screening (for women 65 or older, and those at higher risk)
- Over-the-counter folic acid for women to reduce the risk of birth defects when prescribed by your doctor for preventive purposes
- Prescribed, FDA-approved medications for breast cancer prevention (if at higher risk, 35 and older with no prior history of breast cancer)
- Rh incompatibility screening (for pregnant women) and follow-up testing (for those at higher risk)
- Routine physical exam
- Routine prenatal care visits⁵
- Syphilis screening for pregnant women
- Urinary tract or other infection screening (for pregnant women)

Preventive services for children

- Age-appropriate preventive medical examinations
- Autism screening by primary care physician (at 18 months and 24 months)
- Behavioral assessments by primary care physician (throughout development)
- Blood pressure screening for adolescents
- Cervical dysplasia screening (for sexually active females)
- Congenital hypothyroidism screening (newborns)
- Depression screening (for adolescents 12 to 18 years)
- Developmental screening (under 3 years) and surveillance (throughout childhood) by primary care physician
- Discussions with primary care physician about:
 - Alcohol and drug use counseling for adolescents
 - Fluoride supplements for children

who have no fluoride in their water source

- Iron supplements for children 6 months to 12 months at risk for anemia
- Obesity screening and counseling
- Sexually transmitted infection prevention counseling for adolescents at higher risk
- Skin cancer counseling for children, adolescents, and young adults aged 10 to 24 years with fair skin in order to minimize exposure to ultraviolet radiation
- Tobacco use cessation and counseling
- Dyslipidemia screening (for children at higher risk of lipid disorders)
- FDA-approved medications for tobacco cessation, including over-the-counter medications, when prescribed by a plan provider
- Gonorrhea prevention medication for the eyes (newborns)
- Hearing screening (newborns)
- Height, weight, and body mass index (BMI) measurements (throughout development)
- Hematocrit or hemoglobin screening
- Hemoglobinopathies or sickle cell screening (newborns)
- Hepatitis B screening (for adolescents at higher risk)
- HIV screening (for adolescents at higher risk)
- Immunizations (from birth to 18 years; doses, recommended ages, and recommended populations vary):
 - Diphtheria, tetanus, pertussis
 - *Haemophilus influenzae* type B
 - Hepatitis A
 - Hepatitis B
 - Human papillomavirus
 - Inactivated poliovirus
 - Influenza
 - Measles, mumps, rubella
 - Meningococcal (meningitis)

- Pneumococcal
 - Rotavirus
 - Varicella
- Lead screening (for children at risk of exposure)
- Medical history (throughout development)
- Oral health risk assessments by primary care physician
 - Fluoride supplementation starting at age 6 months for children who have no fluoride in their water source
 - Fluoride varnish for the primary teeth of all infants and children starting at the age of primary tooth eruption
- Over-the-counter drugs when prescribed by your doctor for preventive purposes:
 - Iron supplements for children to reduce the risk of anemia
 - Oral fluoride for children to reduce the risk of tooth decay
- Phenylketonuria screening (newborns)
- Routine physical exam
- Tuberculin testing (for children at higher risk of tuberculosis)
- Vision screening

Additional state- or region-mandated services⁶

For health plans issued in one of these states, additional state-mandated preventive services are also listed for that state.

California

- Artificial insemination and sperm collection, processing, and testing for HIV-negative women who wish to conceive using sperm from HIV-positive donors
- First postpartum visits⁷
- Prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)
- Retinal photography screenings for adults and children
- Travel immunizations

Colorado⁵

- Breast cancer screening for all at-risk individuals regardless of age
- Colon cancer screening for all at-risk individuals regardless of age

Georgia

- Ovarian cancer surveillance test for women over 35 or at risk
- Prostate cancer screenings

Maryland

- Labs and X-rays associated with well-child visits
- Prostate cancer screenings

Oregon

- First postpartum visits
- Prostate cancer screenings

Virginia

- Labs and X-rays associated with well-child visits
- Prostate cancer screenings

Washington

- First postpartum visits
- Prostate cancer screenings

Washington, D.C.

- Labs and X-rays associated with well-child visits
- Prostate cancer screenings

¹Grandfathered plans are plans that have been in existence since on or before March 23, 2010, and that meet certain requirements. Grandfathered plans are exempt from some of the changes required under the Affordable Care Act, including those related to preventive services. If a member is enrolled in a grandfathered plan, this will be stated in their *Evidence of Coverage, Membership Agreement, or Certificate of Insurance*.

²Breast pumps and certain over-the-counter drugs may not be covered in plans that do not include ACA preventive package (see your *Evidence of Coverage, Membership Agreement, or Certificate of Insurance* for details).

³In September 2015, the United States Preventive Services Task Force determined that current evidence is insufficient to assess the balance of benefits and harms of screening of iron deficiency in pregnant women to prevent adverse maternal health and birth outcomes. Despite this determination, Kaiser Permanente will continue to cover this service as preventive.

⁴In September 2015, the United States Preventive Services Task Force determined that current evidence is insufficient to assess the balance of benefits and harms of pharmacotherapy interventions for tobacco cessation in pregnant women. Despite this determination, Kaiser Permanente will continue to cover this service as preventive.

⁵Prenatal visits in Colorado are covered as routine base medical services and are subject to their applicable copayment, coinsurance, or deductible.

⁶Most self-funded groups are not subject to state mandates. Some self-funded state and local government groups may not be subject to state mandates. For more information, see your *Summary Plan Description* or talk to your employer's benefits administrator.

⁷California health savings account-compliant plans do not cover postpartum visits without a copayment, coinsurance, or deductible.

The required preventive services are based on recommendations by the United States Preventive Services Task Force, the Health Resources and Services Administration, and the Centers for Disease Control and Prevention. The services listed in this document may be subject to certain guidelines, such as age and frequency. They may be subject to cost sharing if they are not provided in accord with these guidelines.

Kaiser Permanente health plans around the country: Kaiser Foundation Health Plan, Inc., in Northern and Southern California, 393 E. Walnut St., Pasadena, CA 91188 • Kaiser Foundation Health Plan, Inc., in Hawaii, 711 Kapiolani Blvd, Tower Suite 400, Honolulu, HI 96813 • Kaiser Foundation Health Plan of Colorado, 10350 E. Dakota Ave., Denver, CO 80247 • Kaiser Foundation Health Plan of Georgia, Inc., 9 Piedmont Center, 3495 Piedmont Road NE, Atlanta, GA 30305 • Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., in Maryland, Virginia, and Washington, D.C., 2101 E. Jefferson St., Rockville, MD 20852 • Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232 • Kaiser Permanente Insurance Company, One Kaiser Plaza, Oakland, CA 94612