



2021 Preventive Health Care Guidelines

Free preventive care to help you be your healthiest.



THE OHIO STATE UNIVERSITY
HEALTH PLAN

Guidelines may change throughout the year based on new research and recommendations. Get the most up-to-date list of the care that's recommended and free at osuhealthplan.com/health-plan-tools/forms-policies.

Children	4
All adults	5
Women	8
Pregnant women	9

What are preventive care services?

It's important to visit your doctor regularly to get preventive care. Preventive care lets your doctor find potential health problems before you feel sick. By finding medical problems early, your doctor can help you get the care you need to stay healthy.

The free preventive care services we list in these guidelines are based on recommendations from the U.S. Preventive Services Task Force, Centers for Disease Control and Prevention (CDC), Health Resources and Services Administration and the latest medical research from organizations like the American Medical Association.

Preventive care includes:



Immunizations



Physical exams



Lab tests



Prescriptions

Questions about preventive care?

Find more information at osuhealthplan.com/health-plan-tools/forms-policies or call Customer Service at the number on the back of your member ID card.

When are services free?

The same service could be preventive (free) or diagnostic (copayments, coinsurance or deductibles apply).

Preventive care is free when it's:

- ✓ Listed in this guide found at osuhealthplan.com/health-plan-tools/forms-policies
- ✓ Completed by an in-network doctor or preferred pharmacy. Go to osuhealthplan.com and use our Find a Doctor tool to find in-network doctors
- ✓ Done for preventive purposes

	REASON FOR SERVICE	WHAT YOU'LL PAY
Preventive care	To prevent health problems. You don't have symptoms.	You won't pay anything.
Diagnostic care	You have a symptom, or you're being checked because of a known health issue.	This is a medical claim. Your deductible, copayments and coinsurance may apply.

How do I know if a service is preventive or diagnostic?

If you receive the services in this guide for diagnostic reasons, you may have a cost. A service is diagnostic when it's done to monitor, diagnose or treat health problems. That means:

- If you have a chronic disease like diabetes, your doctor may monitor your condition with tests. Because the tests manage your condition, they're diagnostic.
- If you have a preventive screening and a health problem shows up, your doctor may order follow-up tests. In this case, the tests are diagnostic.
- If your doctor orders tests based on symptoms you're having, like a stomachache, these tests are diagnostic.



Each year, 7 in 10 American deaths are from chronic diseases like diabetes and heart disease. Many of these diseases can be prevented with early detection and the right care.
Source: CDC

Examples of preventive and diagnostic services

SERVICE	IT'S PREVENTIVE (FREE) WHEN ...	IT'S DIAGNOSTIC WHEN ...
COLON CANCER SCREENING	Your doctor wants to screen for signs of colon cancer based on your age or family history. If a polyp is found and removed during your preventive colonoscopy, the colonoscopy and polyp removal are preventive.	You're having a health problem, like bleeding or irregularity.
DIABETES SCREENING	A blood glucose test is used to detect problems with your blood sugar, even though you don't have symptoms.	You're diagnosed with diabetes, and your doctor checks your A1c.
OSTEOPOROSIS SCREENING	Your doctor recommends a bone density test based on your age or family history.	You've had a health problem, or your doctor wants to determine the success of a treatment.
METABOLIC PANELS	Never preventive.	Always diagnostic. Studies show that a metabolic panel isn't the best test for detecting or preventing illnesses.
COMPLETE BLOOD COUNT (CBC)	Never preventive.	Always diagnostic. Studies show there's no need for this test unless you have symptoms.
PROSTATE EXAM (PSA)	Never preventive.	Always diagnostic. National guidelines have changed recently because this test gives many false results.
URINALYSIS	Never preventive.	Always diagnostic. National guidelines say there's no need for this test unless you have symptoms.

Children's health



Care for newborns through age 18

You can keep track of services by completing the “Date received” column.

More than one child? Visit osuhealthplan.com/health-plan-tools/forms-policies for additional copies.

Physical exams (well-child visits)

AGE	RECOMMENDATION	DATE RECEIVED
Newborn	1 visit 3 – 5 days after discharge	
0 – 2 years	1 visit at 1, 2, 4, 6, 9, 12, 15, 18 and 24 months	
3 – 6 years	1 visit at 30 months and 1 visit every year for ages 3 – 6	
7 – 10 years	1 visit every 1 – 2 years	
11 – 18 years	1 visit every year	

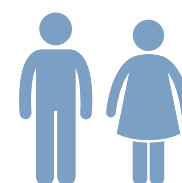
Immunizations

VACCINE	RECOMMENDATION	DATE RECEIVED
Chickenpox (varicella)	1 dose between 12 – 15 months old. Second dose between 4 – 6 years old. For kids 14 and older with no history of the vaccination or disease, 2 doses 4 – 8 weeks apart.	
Diphtheria, tetanus, whooping cough (pertussis)	1 dose of DTaP at 2, 4, 6 and 18 months old 1 dose of Tdap between 11 and 12 years with a Td booster every 10 years after. Those older than 7 years and not previously immunized can get a single dose of Tdap.	
Flu (influenza)	2 doses 4 weeks apart for healthy children between 6 months and 8 years the first time they get the vaccine. Children who've previously had the flu shot can receive 1 dose annually.	
Haemophilus influenzae type b	1 dose at 2, 4 and 6 months and once between 12 – 18 months old	
Hepatitis A	2 doses at least 6 months apart between 12 – 23 months old. For children not previously immunized, 2 doses can be given at least 6 months apart at your doctor's discretion.	
Hepatitis B	1 dose to all newborns before leaving the hospital, a second dose between 1 – 2 months and a third dose between 6 – 18 months. May begin between 2 – 18 years old if not immunized as a baby.	
HPV (human papillomavirus)	2 to 3 doses over a 24-week period starting at age 11 for boys and girls. Your doctor may give the vaccine as early as age 9 if your child is at high risk.	
Polio	1 dose at 2 and 4 months and between 16 – 18 months (3 doses total). Then, 1 dose between 4 – 6 years old.	
Measles, mumps, rubella (MMR)	1 dose between 12 –15 months and a second between 4 – 6 years. Can be given to older children if no history of vaccination or the disease.	

Immunizations

VACCINE	RECOMMENDATION	DATE RECEIVED
Meningitis (meningococcal)	1 dose between 11 – 12 years, with another dose at 16 years. If the first dose is done between 13 – 15 years, then give the second dose between 16 – 18 years. Doctors may give vaccine as early as age 2 if your child is at high risk.	
Pneumonia (Pneumococcal)	1 dose at 2, 4 and 6 months and again at 12 to 15 months. Children over age 2 can get a single dose if not previously immunized. Children with an underlying medical condition can receive an additional dose. Children at high risk can be vaccinated after age 7.	
Rotavirus	1 dose at 2, 4 and 6 months old	

Adult health



Physical exams

AGE	RECOMMENDATION	DATE RECEIVED
19 – 21 years	Once every 2 – 3 years; annually if desired	
22 – 64 years	Once every 1 – 3 years	
65 and older	Once every year	

Immunizations *Doses, ages and recommendations vary.*

VACCINES	RECOMMENDATION	DATE RECEIVED
Chickenpox (varicella)	2 doses 4 weeks apart for those with no history of the vaccination or disease	
Flu (influenza)	1 dose every year	
HPV (human papillomavirus)	3 doses over a 24–week period up to age 26. Some individuals up to age 45 may benefit, discuss with your doctor.	
Measles, mumps, rubella (MMR)	1 – 2 doses if no history of the vaccination or disease. Can be given after age 40 if at high risk.	
Meningitis (meningococcal)	1 dose for ages 19 – 24 if no history of vaccination. Can be given after age 40 if at high risk.	
Pneumonia (Pneumococcal)	1 dose for those 65 and older. Those at high risk or with a history of asthma or smoking should have 1 dose between ages 19 and 64 with a booster 5 years later.	
Shingles (herpes zoster)	Ages 50 and older	
Tetanus, diphtheria and whooping cough (pertussis)	1 dose if no history of pertussis vaccine regardless of interval since last tetanus vaccine, followed by tetanus every 10 years. This vaccine is recommended especially if you have contact with children under age 1.	

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION	DATE RECEIVED
Abdominal aortic aneurysm screening	Once for men ages 65 – 75 with a history of smoking	
Advance care planning	At physical exam. We recommend you choose someone to speak on your behalf. Tell them your health wishes and then document your wishes in an advance directive.	
Alcohol misuse screening and counseling	At physical exam	
Preventive guidance for family and intimate partner violence, breast self-exam, menopause counseling, safety, falls and injury prevention	At doctor's discretion	
Blood pressure screening	At physical exam	
Cholesterol test	A test (total cholesterol, LDL, HDL and triglyceride) once at least 5 years or at your doctor's discretion	
Colon cancer screening	For those ages 45 – 75, one of the following screenings: <ul style="list-style-type: none"> • Colonoscopy every 10 years • CT colonography every 10 years • Flexible sigmoidoscopy every 5 years • Fecal occult blood test yearly • Fecal DNA testing every 3 years Those with a family history (first-degree relative) of colorectal cancer or adenomatous polyps should begin screening at age 40 or 10 years before the youngest case in the immediate family with a colonoscopy every 5 years.	
Depression screening	During physical exam	
Diabetes screening	At your doctor's discretion	
Diet counseling	At your doctor's discretion if you're at high risk for heart and diet related chronic diseases	
Height, weight and body mass index (BMI)	During physical exam	
Hepatitis C screening	Adults at high risk and a one-time screening for adults born between 1945 and 1965	
HIV screening	All adults up to age 65. Screen older adults if at high risk.	

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION	DATE RECEIVED
Lung cancer screening	Annual screening (including CT) for adults ages 55 to 80 who have a 30-pack a year smoking history and currently smoke or quit smoking within the past 15 years	
Medical history	During physical exam	
Obesity screening and counseling	All adults during physical exam	
Sexually transmitted infection (STI) counseling and screening	Annual screening and counseling for chlamydia, gonorrhea and syphilis for adults who are at high risk.	
Tobacco–use counseling	At each visit. Includes cessation counseling and interventions. Expanded counseling for pregnant women.	
Tuberculosis (TB) testing	At your doctor’s discretion if you’re at high risk	

Women’s health



Care that’s recommended for women

You can keep track of the services you’ve had by completing the “Date received” column. See the “Adult health” section on page 6 for more care that’s recommended for all adults.

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION	DATE RECEIVED
BRCA risk assessment and genetic counseling/testing	Risk assessments for women with a family history of breast, ovarian, tubal or peritoneal cancer. Women who test positive should receive genetic counseling and, if indicated after counseling, BRCA testing.	
Breast cancer counseling	At your doctor’s discretion for women at high risk of breast cancer.	
Breast cancer screening (mammogram)	Once every year for women ages 40 and older. Begins at age 30 for those at high risk, such as a family history of breast cancer. Includes 3D mammograms.	
Contraceptive counseling and contraception methods	FDA–approved contraceptive methods, sterilization procedures, education and counseling.	
Domestic violence and intimate partner violence screening and counseling	Annually	
HIV counseling and screening	Adults up to age 65. Screen older adults if at high risk.	
Osteoporosis	Women 65 and older. Younger women who are at high risk.	
Pap and HPV test (cervical cancer screening)	Pap test once every 3 years for women 21 – 61 years old or a Pap test with an HPV test every 5 years for women ages 30 – 65.	
Sexually transmitted infection (STI) prevention counseling and screening	Annual screening and counseling for chlamydia, gonorrhea and syphilis for women who are at high risk.	
Well–woman visits (physical exams)	1 visit every 1 – 3 years	

Contraceptives Prescription required for OTC. To submit include prescription, receipt, and claim form.

TYPE	METHOD	BENEFIT LEVEL
Hormonal	<ul style="list-style-type: none"> • Oral contraceptives • Injectable contraceptives • Patch • Ring 	Generic contraceptive method for women are covered at 100% (free). Your deductible and/or prescription coinsurance applies for brand-name contraceptives when there is a generic available.
Barrier	<ul style="list-style-type: none"> • Diaphragms • Female Condoms • Contraceptive sponge • Cervical cap • Spermicide 	
Implantable	<ul style="list-style-type: none"> • IUDs • IUD with Progestin • Implantable rod 	Preferred options are covered at 100% (free). For pharmacy coverage, please refer to the PBM formulary.
Emergency	<ul style="list-style-type: none"> • Ella® • Next Choice® • Next Choice® One Dose • My Way™ 	Covered at 100%
Permanent	Tubal ligation	Covered at 100% for outpatient facilities. If received during an inpatient stay, only the services related to the tubal ligation are covered in full. Reversal procedures after permanent contraception are not covered per plan guidelines.

Pregnant women



Pregnant women

If you're pregnant, plan to become pregnant or recently had a baby, we recommend the preventive care that's listed here. You can keep track of the services you've had by completing the "Date received" column.

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION	DATE RECEIVED
Bacteriuria screening with urine culture	Between 12 – 16 weeks gestation or during first prenatal visit if later	
Breastfeeding support, supplies and counseling	Lactation support and counseling to pregnant and postpartum women, including costs for rental of breastfeeding equipment	

Doctor visits and tests

ASSESSMENTS, SCREENINGS AND COUNSELING	RECOMMENDATION	DATE RECEIVED
Gestational diabetes screening	Women 24 – 28 weeks pregnant and those identified as high risk for gestational diabetes	
Hematocrit or hemoglobin screening	During the first prenatal visit	
Hepatitis B screening	During the first prenatal visit	
HIV screening	All pregnant women during each pregnancy	
Iron–deficient anemia screening	On a routine basis	
Rh incompatibility screening	On first visit and follow–up testing for women at high risk	
Sexually transmitted infection (STI) screening	Screening and counseling for chlamydia, syphilis, and gonorrhea	

Immunizations

VACCINE	BEFORE PREGNANCY	DURING PREGNANCY	AFTER PREGNANCY	DATE RECEIVED
Chickenpox (varicella)	Yes; avoid getting pregnant for 4 weeks	No	Yes, immediately postpartum	
Hepatitis A	Yes, if at risk	Yes, if at risk	Yes, if at risk	
Hepatitis B	Yes, if at risk	Yes, if at risk	Yes, if at risk	
HPV (human papillomavirus)	Yes, if between ages 9 and 26 *	No	Yes, if between ages 9 and 26 *	
Flu nasal spray	Yes, if less than 50 years of age and healthy. Avoid getting pregnant for 4 weeks.	No	Yes, if less than 50 years of age and healthy. Avoid getting pregnant for 4 weeks.	
Flu shot	Yes	Yes	Yes	
Measles, mumps, rubella (MMR)	Yes; avoid getting pregnant for 4 weeks	No	No	
Meningococcal	If indicated	If indicated	If indicated	
Pneumococcal	If indicated	If indicated	If indicated	
Tetanus	Yes (Tdap preferred)	If indicated	Yes (Tdap preferred)	
Tetanus, diphtheria, whooping cough (1 dose only)	Yes	Yes	Yes	

* Some women ages 27 to 45 may benefit, discuss with your doctor.



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