

Patty's Points



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We're three months into the new year. Don't forget to schedule your well visits! No matter which plans you select, wellness services are covered at no cost to you.

Dear Patty:

Q: What are some of the Preventive Services my Florida Blue health plan covers at \$0 copay?

A: Below is a list of some of preventive services covered at no cost to you:

PREVENTIVE SERVICE	DESCRIPTION OF BENEFITS
Annual Physical	<ul style="list-style-type: none"> Annual physical with your Primary Care Physician (PCP). One annual physical visit per calendar year This includes recommended routine vaccines, i.e., flu vaccine, Shingles, etc. If your doctor does not supply the vaccine and you are eligible, please go to Walgreens Pharmacy and the pharmacist can administer the vaccine at \$0 under your pharmacy benefits. <p><i>Note: When scheduling your appointment, please specify the visit is for your annual routine physical. Be aware If you bring up a new issue during your visit, the provider may code the visit as non-routine and a copay may apply.</i></p>

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Well Woman Visit	<ul style="list-style-type: none"> Well woman preventive care visit annually for adult women to obtain the recommended preventive services that are age and developmentally appropriate, including preconception care and many services necessary for prenatal care. One well woman visit per calendar year. In addition, <u>a well woman exam</u> including the Pap Test is covered. <i>Florida Blue follows guidelines as recommended by the CDC and AHRQ. Women age 21 -29 should have Pap Test every 3 years. Women age 30-65 should have Pap Test alone every 3 years, or combined with HPV testing every 5 years. Women age 65+ should discuss with their doctor.</i> This may be performed by your Primary Care Physician or OB-GYN. <p>Note: Please make sure Pap Test specimens are sent to Quest Diagnostics, the preferred in-network lab in Florida.</p>
Contraceptive methods & counseling	<ul style="list-style-type: none"> Education and counseling related to contraceptives and sterilization. Intrauterine Devices (IUD's) are covered 100% of allowable charges when billed as routine. This includes the <u>insertion</u> and <u>removal</u> of the device by an in-network provider. Devices covered at \$0 include those currently on the market: Paragard, Mirena, Skyla, Kyleena, and Liletta. Click here to see a complete list of contraceptive methods covered at \$0. Surgical sterilization. The professional fees for tubal ligations will be covered at \$0 cost share in network. Copays/Deductible/Coinsurance for the facility charges (hospital) will still apply.

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<p>BRCA risk assessment and genetic counseling/testing</p>	<ul style="list-style-type: none"> • Provides Screening for women who have family members with breast, ovarian, tubal, or peritoneal cancer to test for an increased risk breast cancer through the presence of mutated BRCA1 or BRCA2 genes. Women with positive screening results should receive genetic counseling and, if indicated after counseling, BRCA testing. • Genetic Counseling, and if necessary, genetic testing for BRCA Mutation covered at no cost share by the member. • Applies to women who have been previously diagnosed with cancer, if she is NOT currently symptomatic of or receiving active treatment for breast, ovarian, tubal, or peritoneal cancer. (Prior Authorization is required.) <p>Note: To avoid out of pocket expenses, please remind your doctor to use Quest Diagnostics, the preferred in-network lab in Florida.</p>
<p>Colonoscopies (Routine)</p> <p>Colonoscopies (Diagnostic)</p>	<ul style="list-style-type: none"> • Age 45-75; Method (colonoscopy, sigmoidoscopy, or fecal occult blood test) and frequency based on risk factors and physician recommendation. • No age criteria. High risk or family history. No frequency limits. Covered at \$0 member cost share when performed at in-network hospital or surgery center. Fees for the surgeon and anesthesiologist also covered at \$0 member cost share. However, pathology fees may apply. • If your Gastroenterologist prescribes you a bowel prep, please ask for the generic oral solution. This will be \$0 copay versus \$60 copay for the brand name. Click here for the name of the generic oral solution and list of other Preventive Medications. <p>Note: Only the colonoscopy procedure is covered at \$0. If you are having another procedure, i.e.,</p>

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	<i>EGD/Upper GI at the same time, you will have out of pocket costs associated with that procedure based on plan type and location of services.</i>
Mammograms (Routine)	<ul style="list-style-type: none"> • Baseline at age 35-40. Thereafter, every 2 years age 40-50; every year age 50+. • At any age if recommended by physician based on risk factors.
Mammograms (Diagnostic)	<ul style="list-style-type: none"> • Diagnostic mammograms are covered at \$0 copay. <p><i>Note: If your doctor ordered any other tests, i.e., ultrasound or MRI, then there will be a member cost share based on your plan type and location of the services.</i></p>
Lung cancer screening and counseling	<ul style="list-style-type: none"> • Ages 50-80; 20 pack smoker history, current smoker/quit within past 15 years
Well Child Exam	<ul style="list-style-type: none"> • Newborn up to age 3: Frequency wellness check-ups; Ages 3-18: Annual wellness check-up • This includes recommended routine vaccines at no cost.

Q: I am an established patient with My Health Onsite (MHO). Do they perform annual physicals and well-woman exams?

A: Yes, both exams are available at MHO. Also, they can administer certain routine vaccinations. These services are at no cost to the employee.

Q: I scheduled my annual mammogram with the 3D Mobile Mammography Bus. Are they in the network?

A: Yes, the 3D Mobile Mammography Bus are in the network for both HMO and PPO plans.