



Wellness and Preventive Care

WellSky Corporation

Take an easy step towards good health

Your number one way to help yourself and your family stay healthy is with preventive care. When combined with healthy eating and exercise, vaccines and early detection are your key to a long and healthy life. That's why your employer offers many preventive treatments at no cost to you when you visit a doctor in your network.

Wellness and preventive care

Your doctor may suggest:

- Screening tests, which may find health concerns before symptoms appear.
- Diagnostic tests, physicals and self-exams, which may find health issues early in their course.

Your doctor may use guidelines to recommend screenings. If you're considering getting a test, it's a good idea to speak with your doctor. Together, you can decide what is right for you.

Built into your health plan are preventive benefits that cover:

- Physical exams.
- Mammograms.
- Colonoscopies.
- Pap smears.
- Prostate blood exams.
- Immunizations.
- Diagnostic X-ray and lab services.

While most in-network benefits are subject to your deductible and coinsurance, these exams are paid at 100 percent when billed as preventive or routine by your health care provider.

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When scheduling a visit for preventive care, just follow these three easy steps:

1

First, you should let your doctor's office know your visit will be for preventive care, or your annual checkup.

2

Before you leave your visit, simply check with the office to be sure your service was listed as preventive.

3

If your doctor refers you to an ancillary provider for preventive tests (e.g., mammogram, colonoscopy, etc.) you should make sure they indicate the purpose is preventive in the referral paperwork, or when filing the claim.

By keeping up with your preventive care and vaccine schedule, you're taking an important step towards your health and well-being.

Screening for adults

Preventive screening	Group	Recommendation
Alcohol and tobacco use	Everyone	Annually
Blood pressure	Everyone	Annually
Breast cancer	Women, age 50 – 74	Mammogram every two years. Talk with your doctor to decide if you need them more often. ¹
Cervical cancer	Women, beginning at age 21	Pap smear for women 21–65 years of age every three years. Women 30–65 years of age may have a pap smear and human papillomavirus (HPV) testing every five years. ²
Cholesterol	Everyone, beginning at age 35	Annually
Colorectal cancer	Everyone, beginning at age 45	Every 10 years. Talk to your doctor.
Depression	Everyone	Annually
Diabetes	Everyone	Glucose test every three years. Talk to your doctor if you are at increased risk.
Lung cancer	Current or former smokers, age 55–80**	Annually

Screening for adults

Preventive screening	Group	Recommendation
Osteoporosis	Women	For post-menopausal women; or under age 65 at increased risk for osteoporosis.
Sexually transmitted diseases	Everyone	Annually
Vision	Everyone	Annually
Weight	Everyone	Annually

Learn more about preventive care

For more information about preventive care, you can visit the website for the United States Department of Health and Human Services at: <http://healthfinder.gov/myhealthfinder>. You can also visit <https://www.hrsa.gov/womens-guidelines> and <https://www.healthcare.gov/what-are-my-preventive-care-benefits>.

If you have questions, we can help. Simply call Meritain Health® Customer Service using the phone number on your member ID card.

*Plan features and availability may vary by location and group size. Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features are subject to change.

** Smokers or former smokers with a 30 pack per year or more smoking history and, if a former smoker, has quit within the past 15 years.

¹U.S. Preventive Services Task Force. Final recommendation statement. Breast cancer: screening. November 2018.



²U.S. Preventive Services Task Force. Final recommendation statement. Cervical cancer: screening. August 2018.

This material is for information only. Health benefits plans contain exclusions and limitations. Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Information is believed to be accurate as of the production date; however, it is subject to change.

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