

Prevention of Obesity

The obesity epidemic places individuals at risk for a number of chronic and debilitating diseases. We are working with physicians, policymakers, The Children's Health Fund and representatives from the private sector to address the childhood obesity crisis and to create solutions to obesity-related problems. As part of our prevention of obesity initiative, the following benefits have been added to our Preventive Schedule.

Benefits for Children

Children with a body mass index (BMI) in the 95th percentile are eligible for:

- Two additional annual preventive office visits specifically for obesity
- Two annual nutritional counseling visits specifically for obesity
- One set of recommended laboratory studies:
 - Lipid profile
A lipid panel measures lipids—fats and fatlike substances used as a source of fuel in your body. The panel measures levels of:
 - Total cholesterol.
 - Triglycerides.
 - High-density lipoprotein (HDL).
 - Low-density lipoprotein (LDL).
 - Hemoglobin A1c
This is a blood test that measures the amount of sugar (glucose) bound to hemoglobin. Normally, only a small percentage of hemoglobin in the blood (4% to 6%) has glucose bound to it. However, people with diabetes (or other conditions that increase their blood glucose levels) have a higher percentage than normal.
 - Aspartate Aminotransferase (AST)
 - AST is used to assess liver function.
 - Alanine Aminotransferase (ALT)
 - ALT is used to assess liver function.
 - Fasting glucose (FBS)
 - This is a measurement of blood glucose taken after you have not eaten for 12 to 14 hours. It is a common test done to screen for diabetes.

Children with a BMI in the 85th percentile are eligible for:

- Two additional annual preventive office visits specifically for obesity and blood pressure measurement.
- Two annual nutritional counseling visits specifically for obesity.

Benefits for Adults

Adults with a BMI over 30 are eligible for:

- Two additional annual preventive office visits specifically for obesity and blood pressure measurement
- Two annual nutritional counseling visits specifically for obesity
- One set of recommended laboratory studies
 - lipid profile
 - hemoglobin A1c
 - AST
 - ALT
 - fasting glucose

Save this 2010 Preventive Schedule and save your health!

This schedule, based on recommendations from the U.S. Preventive Services Task Force, the Centers for Disease Control and Prevention, the American College of Obstetricians and Gynecologists and the American Cancer Society January 2008 Colorectal Cancer Screening guidelines, is a reference tool for planning your family's preventive care with your doctor. Your specific needs may vary according to your personal risk factors. Your doctor is always your best resource for determining if you're at an increased risk for a condition. If you have questions about your coverage, please call the toll-free Member Service number on your identification card.

Adult (age 19+) Preventive Schedule

General Health Care	
Physical Exams/Health Guidance	Every 1-2 years for adults 19-49 years of age. Every year for adults 50 years of age and older.
Blood Pressure Screening	At each office visit. Minimum of once every two years. Annually, if diastolic > 85 mmHg or systolic > 130 mmHg.
Pelvic /Breast Exam by Practitioner	Annually.
Screenings/Procedures (includes PA state mandated benefits)	
Lipid Panel	Routine screening every 5 years beginning at age 20. More frequent testing of those at risk for cardiovascular disease.
Fasting Blood Glucose	For high-risk patients screenings should start at age 45 at three-year intervals. Earlier screening may be indicated based on individual risk factors.
Abdominal Aortic Aneurysm Screening	One-time screening by ultrasonography for men between age 65 and 75 who have ever smoked.
Mammogram	Every 1 to 2 years starting at age 40 or as recommended by doctor.
BRCA Mutation	One-time genetic assessment for breast and ovarian cancer susceptibility as recommended by your doctor. Annual breast MRI if BRCA positive or immediate family of BRCA carrier but untested.
Pap Test	Test every 1-3 years based on history.
Chlamydia Screening	Annually for all sexually active non-pregnant women 24 years and younger, and for older non-pregnant women who are at increased risk.
Gonorrhea, HIV and Syphilis Screenings	All sexually active males and females, as recommended by your doctor.
Bone Mineral Density Screening	Once every 2 years: All women 65 years and older or men 70 years and older. Or, younger post-menopausal women who have had a fracture or have one or more risk factors for osteoporosis.
Colorectal Cancer Screening	All: beginning at age 50 annual screening with fecal occult blood test (FOBT), or screening with flexible sigmoidoscopy every 5 years with or without annual FOBT, or double contrast barium enema every 5 years or colonoscopy every 10 years. High-risk: Earlier or more frequently as recommended by your doctor.
Prostate Cancer Screening	Discussion of risks/benefits of prostate cancer screening. Testing may include annual Prostate Specific Antigen (PSA) and/or digital rectal exam.
Immunizations	
Diphtheria, Tetanus (Td/Tdap)	Booster every 10 years for all adults.
Measles/Mumps/Rubella (MMR)	As recommended by your doctor. High risk: 2 doses.
Pneumococcal	High-risk or at age 65: One dose per lifetime with an additional one-time revaccination as recommended by doctor.
Influenza	Annually beginning at age 50. High-risk: Annually between ages 19-49.
Chicken Pox (Varicella)	One series of two doses at least one month apart for adults with no history of chicken pox.
Hepatitis A	Based on individual risk or physician recommendation: One two-dose series.
Hepatitis B	Based on individual risk or physician recommendation: One three-dose series.
Meningococcal	Based on individual risk or physician recommendation: One dose per lifetime.
Human Papillomavirus (HPV)	For females age 19-26 who have not been vaccinated previously, one three-dose series. Dose 2 at 2 months from Dose 1. Dose 3 at 6 months from Dose 1.
Shingles (Zoster)	One dose age 60 years of age and older.



Schedule for Children

As a parent, you want to keep your child healthy and happy. That's why we put together this preventive health schedule for children.

This schedule was developed based on recommendations from the U.S. Preventive Services Task Force, the American Academy of Pediatrics, the American

Academy of Family Physicians and the Centers for Disease Control and Prevention, are designed to help you and your child's doctor develop a plan for

preventive health care for your child. If you have questions, talk to your child's doctor. For questions regarding benefits, contact Member Service.

	Birth	1 month	2 months	4 months	6 months	9 months	12 months	15 months	18 months	24 months	30 months	3 years	4 years	5 years	6 years	7 years	8 years	9 years	10 years	11 years	12 years	15 years	18 years	
Wellness exam ¹	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Every year from ages 11 through 18			
Blood Pressure												✓	✓	✓	✓	✓	✓	✓	✓	Every year from ages 11 through 18				
Visual Screening ^{2, 3}												✓	✓	✓	✓		✓				✓	✓	✓	
Hearing Screening ²	✓												✓	✓	✓		✓				✓	✓		
SCREENINGS																								
Hereditary Metabolic Screening	— ✓ —																							
Lead Screening						✓														Or, when indicated (Please also refer to your state specific recommendations.)				
Hematocrit or Hemoglobin							✓													Annually for females during adolescence and when indicated				
IMMUNIZATIONS ⁴ (includes PA state mandated benefits)																								
Hepatitis A ⁵							Dose 1		Dose 2															
Hepatitis B ⁵	Dose 1		Dose 2				Dose 3 (6 to 18 months)																	
Diphtheria/Tetanus/Pertussis (DTaP) ⁶			Dose 1	Dose 2	Dose 3			Dose 4 (15 to 18 months)				Dose 5 (4 to 6 years)								Recommended Tdap at 11-18 yrs. old if five or more years have passed since the child's last dose of DTP, DTaP or Td				
H. Influenzae Type B (Hib)			Dose 1	Dose 2	Dose 3 ⁶		Dose 4 (12 to 15 months)																	
Polio (IPV) ⁶			Dose 1	Dose 2		Dose 3 (6 to 18 months)						Dose 4 (4 to 6 years)												
Pneumococcal Conjugate (PCV) ^{6, 7}			Dose 1	Dose 2	Dose 3		Dose 4 (12 to 15 months)																	
Measles/Mumps/Rubella (MMR) ⁵							Dose 1 (12 to 15 months)					The second dose of MMR is routinely recommended at 4 to 6 years, but may be administered during any visit, provided at least one month has elapsed since receipt of the first dose and that both doses are administered at or after age 12 months												
Chicken Pox ⁵							Dose 1					Dose 2		Children not receiving the vaccine prior to 18 months can receive the vaccine at any time. Children 13 years or older who haven't been vaccinated and haven't had chicken pox should receive two doses of the vaccine at least 4 weeks apart. Second dose, catchup recommended for those who previously received only 1 dose.										
Influenza ⁵													Annually for all children 6 months - 18 years											
Meningococcal																				One dose per lifetime beginning at age 11				
Rotavirus			Dose 1	Dose 2	Dose 3																			
Human Papilloma-virus (HPV)																				One three dose series for females between 9 and 18 years old. Dose 2 at 2 months from Dose 1. Dose 3 at 6 months from Dose 1.				
CARE FOR PATIENTS WITH RISK FACTORS																								
Tuberculin Test																				Testing should be done upon recognition of high-risk factors. Frequency should be determined by community and personal risk factors				
Cholesterol Screening																				Screening will be done at the doctor's discretion, based on the child's family history and risk factors				
Chlamydia, Gonorrhea, HIV and Syphilis Screenings ⁸																				As recommended by your doctor.				
Pelvic Exam and Pap Test ^{9, 10}																				As recommended by your doctor.				

1- This includes, at appropriate ages, height and weight measurement, developmental and behavioral assessment, including autism screening, and other care as determined by the doctor. Coverage is based on a calendar year.
 2- As shown and when conditions indicate. If patient is uncooperative, rescreen within six months.
 3- Optometric exams require an optional vision benefit

4- Additional immunizations and expanded age ranges may be eligible based on the PA State mandate for childhood immunizations.
 5- Children can get this vaccine at any age if not previously vaccinated.
 6- Or other series/schedule as recommended by the doctor.

7- Previously unvaccinated older infants and children who are beyond the age of the routine infant schedule should follow the dosing guidelines recommended by their doctor.
 8- Routine screening for all sexually active females and males.
 9- Strongly recommended for females who have been sexually active.
 10- Pap tests should begin approximately 3 years after onset of sexual activity.