



Make the most of your preventive health benefits



What is preventive care? CIGNA HealthCare defines it as periodic well visits, routine immunizations and routine screenings provided to you when you have no symptoms or have not been diagnosed with a disease. Additional immunizations and screenings may be included for those individuals at increased risk for a particular disease.

CIGNA Choice Fund® covers preventive care 100% when you receive it from a participating CIGNA HealthCare provider. That means: ■ No cost to you ■ No cost to your fund ■ No plan deductible to meet

While your doctor will determine the tests that are right for you based on your age, gender and family history, here's a list of what is covered by your preventive health benefits.

Well-Child Care (through age 18)	Adult Care (after age 18)
<p>Well-baby and Well-child visits</p> <ul style="list-style-type: none"> ■ Periodic visits, depending on age <p>Immunizations as appropriate by age, such as:</p> <ul style="list-style-type: none"> ■ Diphtheria, tetanus and acellular Pertussis (DTAP) ■ Haemophilus influenzae b (Hib) ■ Hepatitis A and B ■ HPV in girls and women ages 9 – 26 ■ Influenza: annually between 6 – 59 months ■ Measles-mumps-rubella (MMR) ■ Meningococcal (MCV4): between ages 11 and 18 ■ Pneumococcal conjugate (PCV) (pneumonia) ■ Poliovirus (IPV) ■ Rotavirus ■ Varicella (chickenpox) <p>Screenings (as appropriate by age)</p> <ul style="list-style-type: none"> ■ Blood pressure ■ Cholesterol: for those at risk ■ Hearing and vision performed during the wellness visit ■ Height and weight ■ Hemoglobin or hematocrit: once a year for females after menarche ■ Pap smear and pelvic exam 	<p>Well-man and Well-woman visits</p> <ul style="list-style-type: none"> ■ Periodic visits, depending on age <p>Immunizations such as:</p> <ul style="list-style-type: none"> ■ Hepatitis A and B (HBV): for those at risk ■ HPV in girls and women ages 9 – 26 ■ Influenza: ages 19 – 49, as your doctor advises; ages 50+, annually ■ Pneumonia: once for those ages 65+ (or younger for those with risk factors) ■ Rubella (German Measles) for women of childbearing age if not immune ■ Tetanus-diphtheria (Td) every 10 years (or TdaP, as indicated) ■ Varicella (chickenpox: if no evidence of prior immunization or chickenpox) ■ Zoster: ages 60+ <p>Screenings</p> <ul style="list-style-type: none"> ■ Blood pressure ■ Cholesterol ages 20+, every 5 years ■ Diabetes screening ages 45+, or if history of risk factor, every 3 years ■ Mammogram once a year for women age 40+ ■ Osteoporosis screening for women ages 65+, 60 for women at high risk ■ Pap test once a year for women ages 19 – 64 ■ Prostate screening (PSA) for men ages 50+, once per year ■ Ultrasound for abdominal aortic aneurysm: men ages 65 –75 who have ever smoked ■ Colorectal cancer screenings ages 50+: <ul style="list-style-type: none"> • Sigmoidoscopy once every 5 years • Fecal occult blood test annually • Colonoscopy once every 10 years • Barium enema once every 5 years ■ Chlamydia screening, sexually active women age 24 and under
<p>Other services which are not classified as preventive care, but are generally covered under the medical benefit, include tests to investigate existing symptoms, tests to follow up for results of screenings and tests to monitor an ongoing condition or prevent a current condition from becoming worse. Deductibles and coinsurance will apply.</p>	

Benefit Exclusions

This document does not guarantee coverage for all preventive services. Immunizations for travel are generally not covered. Other non-covered services can include any medical service or device that is not medically necessary, and any services and supplies for or in connection with experimental, investigational or unproven services.

This document contains only highlights of preventive health services. The specific terms of coverage, exclusions and limitations, including legislated benefits, are included in the Summary Plan Description or Insurance Certificate.

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