



RCAB Health Plan Preventive Care Services/Other Services Provided With No Out-of-Pocket Cost

As of July 1, 2021



MASSACHUSETTS

The RCAB Health Plan provides coverage for preventive care services at no additional cost to employees and their family members enrolled in the Enhanced, Basic, or High Deductible Health Plan, as long as these services are received from a provider that participates in the Blue Cross PPO network, or, for pharmacy services, from a pharmacy that participates in the CVS/Caremark network. These services are provided to help prevent diseases or injuries, rather than to diagnose or treat a symptom or complaint/to treat or cure a disease.

- Routine adult exams (in-network only)
- Routine GYN exams/annual well-woman exams
- Natural family planning services
- Routine hearing and vision exams (vision exam once per Plan year)
- Routine prenatal services
- Well newborn care during enrolled mother's maternity admission
- Routine pediatric exams (in-network only)
- Physical therapy to prevent falls in community-dwelling adults ages 65 and older
- Routine lab tests (if part of preventive visit)

The RCAB Health Plans cover the preventive services listed below at no additional cost when the services are obtained from an in-network provider. Some of these services may also be covered as part of the above-listed routine physical exams, such as checkups, routine gynecological visits, or pediatric exams.

Screenings, Tests, and Procedures For Adults (Age 19 and Older)

- Blood pressure
- Depression
- Cholesterol
- Colorectal cancer
- Diabetes in asymptomatic adults
- Gonorrhea
- Hepatitis B
- Hepatitis C
- Tuberculosis
- HIV
- Syphilis
- Lung cancer screening for adults age 55 to 80 who have a 30-pack-per-year smoking history and currently smoke or have quit within the past 15 years
- Dyslipidemia screening

Males:

- Abdominal aortic aneurysm, for males 65–75 (once per lifetime)

Females:

- Breast cancer mammography (at least one baseline mammogram between ages 35-39 and one mammogram per calendar year for a member age 40 or older)
- Cervical cancer, including Pap smears (one per calendar year)
- Chlamydial infection
- Osteoporosis, for women age 60 and older (one per calendar year)
- Domestic violence
- HPV DNA testing
- Breast cancer susceptibility gene (BRCA) testing

Prenatal:

- Bacteriuria (pregnant women at 12 weeks or first prenatal visit)
- Rh incompatibility
- Screening for gestational diabetes
- Preeclampsia screening
- Iron deficiency anemia screening

Counseling Services For Adults (Age 19 and Older)

- Aspirin for the prevention of heart disease
- Breast cancer chemoprevention
- Breast cancer screening
- Breastfeeding
- Alcohol misuse (includes screenings)
- Sexually transmitted infections
- Tobacco use (includes screenings)
- Obesity (includes screenings)
- Healthy diet for hyperlipidemia and risk for diet-related chronic disease
- HIV
- Skin cancer
- Intensive behavioral counseling for obese adults with cardiovascular disease (CVD) risk factors

Pharmacy Services, Immunizations, and Supplies For Adults (Age 19 and Older)

- Generic low-to-moderate dose statin medication for adults ages 40–75 years with no history of CVD, one or more CVD or greater risk factors, and a calculated 10-year CVD event risk of 10%
- Folic acid supplements through age 50
- Risk-reducing medications for those at increased risk of breast cancer
- Bowel preparations
- Tobacco cessation products

Immunizations:

- Hepatitis A
- Hepatitis B
- Herpes zoster

- HPV
- Influenza
- Measles, mumps, rubella
- Meningococcal
- Pneumococcal
- Tetanus, diphtheria, pertussis
- Varicella
- Rabies
- Travel immunizations

Supplies:

- Breastfeeding support and breast pumps (one per birth; hospital-grade pumps not covered)

Over-the-Counter Medications:

- Generic aspirin (81mg)
- Generic folic acid up to age 50
- Generic smoking cessation (up to two 90-day supplies per calendar year)
- Generic vitamin D age 65 and older
- Bowel preparations

Screenings, Tests, and Counseling Services For Children (Birth Through 18 Years)

- Obesity screening, behavioral interventions, and counseling
- Phenylketonuria
- Lead
- Developmental screening
- Autism screening
- Developmental surveillance
- Psychosocial and behavioral assessment
- Alcohol and drug use assessment
- Dyslipidemia
- Cervical dysplasia
- Tuberculin test
- Hematocrit or hemoglobin
- Sexually transmitted diseases
- HIV screening (for adolescents at risk)
- Visual acuity screening
- Vision screening/assessment
- Oral health risk assessment
- Tobacco counseling and cessation interventions

Newborns:

- Hearing loss (up to one year old)
- Congenital hypothyroidism
- Sickle cell disease
- Metabolic and hemoglobin

Adolescents:

- Depression (ages 12–18)

Pharmacy Services and Immunizations For Children (Birth Through 18 Years)

- Dental cavities chemoprevention, oral fluoride (up through age five)
- Iron supplements for infants (up to 12 months old)
- Prophylactic eye medication for gonorrhea for infants (up to 12 months old)
- Generic over-the-counter iron supplements for infants (up to 12 months old)

Immunizations Ages 0–18:

- Diphtheria, tetanus, pertussis
- Hepatitis A
- Hepatitis B
- Inactivated poliovirus
- Influenza
- Measles, mumps, rubella
- Meningococcal
- Pneumococcal
- Rotavirus
- Varicella (chickenpox)

Ages 0–4:

- Haemophilus influenzae type B

Ages 11 and Older:

- HPV

Additional Preventive Services or Services with No Additional Cost/Reimbursement Under Enhanced and Basic Plans

- Preventive dental care for dependents under age 18 for treatment of cleft lip/cleft palate
- Hearing aids/related services for children 21 and under (some limitations apply)(under HDHP, no charge for hearing aids and early intervention after deductible is met)
- Emergency ambulance services (under HDHP, no charge after deductible is met)
- Dialysis services (under HDHP, no charge after deductible is met)
- Outpatient intervention services for eligible child from birth through age two
- Hospice services (under HDHP, no charge after deductible is met)
- Certain medical formulas and low protein foods (formula at no cost under Enhanced Plan only)(under HDHP, 20% co-insurance after deductible)
- Childbirth class (reimbursement per fee schedule)

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