

Mississippi State and School Employees' Health Insurance Plan Wellness/Preventive Coverage

Wellness/Preventive Services and Screenings Covered at 100%	Birth to 2 years	Ages 3-11 years	Ages 12-17	Female 18-34	Male 18-39	Female 35-39	Male 40-49	Female 40-49	Male 50+	Female 50+
Wellness visits, preventive medicine evaluations or re-evaluations including blood pressure, dental caries screening, vision and hearing screening for age 3-5, and counseling as appropriate for risk factors, age or stage of development.	1 ●	1 ●	1 ●	1 ●	1 ●	1 ●	1 ●	1 ●	1 ●	1 ●
Hemoglobin, hematocrit or CBC	2 ●			2 ●		2 ●		2 ●		2 ●
TB skin testing as needed	●	●	●	●	●	●	●	●	●	●
Diabetes screening (HbA1c) once per calendar year				●	●	●	●	●	●	●
Glucose once per calendar year (only for high-risk individuals) beginning at age 3		●	●	●	●	●	●	●	●	●
Lipid profile once per calendar year				3 ●	●	●	●	●	●	●
Pap smear once every three or five years				4 ●		4 ●		4 ●		4 ●
Pelvic and breast exam once per calendar year, included in wellness visit			5 ●	5 ●		5 ●		5 ●		5 ●
Sexually transmitted disease screenings (chlamydia infection [age 18-24], syphilis, gonorrhea)			●	●	●	●	●	●	●	●
HIV screening			6 ●	6 ●	6 ●	6 ●	6 ●	6 ●	6 ●	6 ●
Hepatitis B screening, for non-pregnant adolescents and adults at high-risk for infection			●	●	●	●	●	●	●	●
Hepatitis C (HCV) screening								7 ●		7 ●
Mammogram once per calendar year						8 ●		8 ●		8 ●
Osteoporosis in post-menopausal women screening										9 ●
Breast and ovarian cancer susceptibility, genetic risk assessment and BRCA mutation testing, once per lifetime			●	●	●	●	●	●	●	●
Flexible sigmoidoscopy once every five years or colonoscopy once every ten years									10 ●	10 ●
Stool for occult blood once per calendar year							●	●	●	●
Lung cancer screening, once per year for adults age 55-80 years who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years.									11 ●	11 ●
Abdominal aortic aneurysms screening men age 65-75, once per lifetime									●	

- Eleven visits within the first 23 months of life; two visits per year age 2-3; one visit per year age 4-17; two visits per year age 18 and over.
- Hemoglobin, hematocrit, CBC, only once between 6-24 months. Females, only performed if pregnant, once per pregnancy.
- Lipid screenings begin at age 21.
- Cervical cancer screening is recommended only for women age 21-65. Women age 21-29, screening should be done by a Pap test every 3 years. For women age 30-65, screening can be done by a Pap test every 3 years, a high-risk HPV test every 5 years, or a Pap test plus a high-risk HPV test every 5 years. Screening is not recommended for women younger than 21 years or older than 65 years (if they have had routine prior screening with negative results), or who have had their uterus and cervix removed.
- Pelvic and breast exams are available for females beginning at age 12 if medically appropriate.
- HIV screenings are for adolescents and adults age 15-65 years. Younger adolescents and older adults who are at increased risk should also be screened.
- Hepatitis C screening is a one-time screening for adults born between 1945 and 1965.
- A mammogram is recommended once every 2 years for women age 50-74 years.
- Bone density studies are covered for women once every 2 years beginning at age 60.
- Flexible sigmoidoscopy and colonoscopy screenings begin at age 50. Additional screenings for individuals considered to be at high-risk for colorectal cancer may be covered under the medical portion of the Plan. A gastroenterology consult prior to a colonoscopy is not covered under a wellness visit. High-risk individuals are defined as someone with a:
 - Personal history of colorectal cancer polyps.
 - Known family history of colorectal cancer syndrome.
 - Strong family history of colorectal cancer or polyps in a first-degree relative younger than 60 or two first-degree relatives of any age. A first-degree relative is defined as a parent, sibling or child.
- Screening for lung cancer with low-dose CT requires precertification by ActiveHealth.

Beginning at the appropriate age, biometrics are required to be collected for a compliant wellness visit. All wellness services must be rendered by a network provider or facility.

Preventive Wellness Guidelines are based on recommendations from the following:

- U.S. Preventive Services Task Force (USPSTF)
- Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices (ACIP)
- U.S. Health Resources & Services Administration (HRSA), Preventive Care and Screenings of Infants, Children and Women
- National Medical Societies



Call your primary care network provider to schedule your wellness visit. To locate a network provider, call 800-294-6307 or go to the "Provider Search" tab at <http://KnowYourBenefits.dfa.ms.gov/provider-search/>.