Anthem

Preventive health guidelines
As of 2022

Take steps toward a healthier future by making preventive care a priority. Your health plan covers certain preventive screenings, wellness exams, and vaccinations to help find potential health issues early and keep you and your family healthy.

While the following guidelines provide examples of various preventive services, they may not mention every service that's available to you. It's important to talk to your doctor about which exams, screenings, and vaccines are right for you and your family, so you can develop a personalized care plan.

These guidelines are based on state-specific requirements and recommendations from health experts, including:

- American Academy of Family Physicians (AAFP)
- American Academy of Pediatrics — Bright Futures (AAP)
- Advisory Committee on Immunization Practices (ACIP)
- American College of Obstetricians and Gynecologists (ACOG)
- American Cancer Society (ACS)
- Centers for Disease Control and Prevention (CDC)
- U.S. Preventive Services Task Force (USPSTF)

Keep in mind, coverage of preventive services varies by health plan, so your plan may not pay for all the services and screenings listed here. To find out what your plan covers, you can:

- Visit **anthem.com**.
- Call the Member Services number on the back of your ID card.
- Check your member handbook.

17112ANMENABS VPOD BV Rev. 06/22

Well-baby and well-child exams

Well-baby exam — birth to 2 years

Infants should be seen by a doctor at birth and again at the following ages, or as their doctor suggests:

- 3 to 5 days
- 2 weeks to 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months
- 24 months

If your child leaves the hospital less than 48 hours after birth, they need to be seen by a doctor 2 to 4 days after being born.

Well-baby visits may include a physical exam, vaccinations, and age-appropriate tests and screenings like those in the chart below. Your child's doctor may also talk to you about:

- Newborn care, safety, and development.
- Nutrition and feeding.
- Your and your family's health and well-being.
- Minimizing exposure to ultraviolet (UV) radiation.

Note: Treatment with an eye ointment is recommended at birth for all infants to prevent any infection passed by the mother during delivery.

Age to receive screening (in months)

Screening	Birth	1	2	4	6	9	12	15	18	24
Weight, length, and head measurement	At each visit									
Body mass index (BMI) percentile*										At 24 months
Metabolic disorders, including PKU (the inability to break down protein), sickle cell disorder (a hereditary blood disorder), and thyroid issues	At birth to 2 months (ideally 3 to 5 days). Bilirubin screening at birth to check for liver problems									
Critical congenital heart defect (birth defects of the heart)	At birth									
Development — brain, body, and behavior	At each visit									
Hearing	In the hospital after birth and at each visit									
Vision	At each visit									
Oral/dental health							Referral to a primary care dentist, if needed, starting at 6 months. Begin yearly dental exams starting at 12 months. Fluoride varnish when teeth start coming in (usually around 6 to 24 months). Fluoride prescription based on your drinking water (from 6 to 24 months).			
Hemoglobin or hematocrit (blood count)						Once between 9 and 12 months. Check for risk as the doctor suggests.				
Lead tests							At 12 and 24 months. Check for risks as the doctor suggests.			
Autism (a condition that affects communication and social skills)									At 18 months	At 24 months
Maternal postpartum depression		At each visit between 1 and 6 months								
Blood pressure	Check for risks at each visit									
Lipid disorder (cholesterol)										Check for risk at 24 months
Tuberculosis	Check for risks as the doctor suggests									

Well-child exam — ages 2 1/2 to 10 years

Depending on your child's age, well-child visits may include a physical exam, vaccinations, and age-appropriate screenings like those on the chart below. Their doctor may also talk to you about:

- Promoting healthy nutrition.
- Exercise, growth, safety, and healthy habits.
- Any learning or school issues.
- Emotional and mental health.
- Family and home living issues.
- Minimizing exposure to UV radiation.

Age to receive screening (in years)

Screening	2 1/2	3	4	5	6	7	8	9	10
Height, weight, and BMI percentile*	Each year								
Development — brain, body, and behavior	Each visit								
Vision	Each year								
Hearing	Each year								
Oral/dental health	Dental exams each year. Fluoride varnish on the teeth when the dentist suggests (between 2 ½ and 5 years). Fluoride prescription based on your drinking water (between 2 ½ and 10 years).								
Hemoglobin or hematocrit (blood count)	Check for risks each year								
Blood pressure risk assessment		Each year starting at age 3. Check for risks before age 3.							
Lead testing	Check for risks each year through age 6								
Tuberculosis	Check for risk and test as the doctor suggests								

Well-child to young adult exam — ages 11 to 20 years

These visits may include vaccinations and age-appropriate screenings, in addition to a full-body exam. Depending on your child's age, their doctor may also discuss:

- Growth and development, such as oral hygiene habits, body image, healthy eating, physical activity, and sleep.
- Emotional well-being, including mood control and overall mental health.
- Safe sex, especially reducing the risk of sexually transmitted infections and diseases (STIs and STDs) and unplanned pregnancy.
- Substance use, including the use of alcohol, tobacco, e-cigarettes, and prescription or illegal drugs.
- School performance.
- Family and home living issues.
- General safety, such as seat belt and helmet use.
- Firearm safety, if they are regularly around guns.
- Intimate partner violence.
- Minimizing exposure to UV radiation.

Age (in years)

Screening	11	12	13	14	15	16	17	18	19	20
Height, weight, and BMI*	Percentile to age 19, then BMI each year									
Development — brain, body, and behavior	Each year									
Depression		Each year starting at age 12								
Blood pressure	Each year									
Vision	Each year									
Hearing	Screen with audiometry, once between ages 11 and 14, once between ages 15 and 17, and once between ages 18 and 21.									
Oral/dental health	Referral to a dentist each year. Fluoride prescription based on your drinking water (ages 11 to 16).									
Hemoglobin or hematocrit (blood count)	Check for risks each year									
STIs — gonorrhea, chlamydia, syphilis	Gonorrhea and chlamydia: each year starting when sexually active. Syphilis: screen in those at increased risk of infection.									
Human immunodeficiency virus (HIV)					Once between 15 and 18.					
Lipid disorder (cholesterol)	Once between ages 9 and 11	Check for risks each year					Once between ages 17 and 21			
Substance use disorder and tobacco addiction	Check for risks each year									
Tuberculosis	Check for risks each year									
Hepatitis C	Check for risks each year							Screen once between ages 18 and 79		
Hepatitis B	Screen if at increased risk of infection									

* Height and weight are used to find BMI. BMI is used to see if a person has the right weight for their height or is under or overweight for their height. BMI percentile is used in children ages 2 to 19 to identify where a child falls in relation to other children.

This guide is just for your information; it is not meant to take the place of medical care or advice. Some people may be at higher risk for health issues due to their family history, their race or ethnicity, or other reasons. Talk to your child's doctor if you have concerns about their health.

Please note: Coverage of these services varies by health plan.

Adult screenings — women

Yearly wellness visits

During your annual visit, your doctor may perform or recommend certain screenings based on your age or medical history, including those on the chart below. Your doctor may also talk to you about:

- Diet and physical activity.
- Mental health, including depression.
- Oral and dental health.
- Tobacco use or how to quit.
- Avoiding secondhand smoke.
- Substance use, including the use of alcohol and prescription or illegal drugs.
- Skin cancer risks.
- Family planning, including:
  - Safe sex (counseling may be provided to prevent STIs in adults at increased risk).
  - Birth control to help avoid unplanned pregnancy.
  - Spacing out pregnancies to have the best birth outcomes.
  - Folic acid supplements for women of childbearing age.
- Intimate partner violence.
- Minimizing exposure to UV radiation.
- Importance of exercise in adults over age 65 in preventing falls.

Keep in mind, the following recommendations are categorized by "men" and "women," and are driven by biological sex (male and female) rather than gender identity. Meet with your doctor to determine which recommendations best apply to you based on individual factors, such as your sex assigned at birth and current anatomy.[1]

Screening	When to receive screening
Height, weight, and BMI[2]	Each year or as your doctor suggests. Women with a high BMI (30 or more) should be offered intensive weight loss interventions to help increase exercise and improve eating habits.
Blood pressure	Each year or as your doctor suggests. Recheck high readings at home.
Cardiovascular (CVD) risk assessment	As your doctor suggests between ages 40 and 75. Women at increased risk should be offered a low- to moderate-dose statin (cholesterol medicine). Lipid screening may be required to assess risk.
Cholesterol	Statin use may be recommended for some women aged 40 to 75 who are at increased risk for cardiovascular disease.
Glucose screening for type 2 diabetes	As your doctor suggests from ages 35 to 70, especially if overweight or obese. Individuals with high blood sugar should talk to their doctor about intensive counseling interventions to promote a healthy diet and physical activity.
Osteoporosis	The test to check how dense your bones are should start no later than age 65; women at menopause should talk to their doctor about osteoporosis and have the test when at risk.
Depression	Each year
Breast cancer risk	As your doctor suggests in women 35 years or older at increased risk. Women who are at increased risk for breast cancer and at low risk for adverse medication effects should be offered risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors.
Mammogram[3]	Each year from ages 40 to 65+
BRCA gene risk assessment	As your doctor suggests in women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or who have an ancestry associated with breast cancer susceptibility 1 and 2 (BRCA1/2) gene mutations.
Cervical cancer: 21 to 29	Pap test every three years
Cervical cancer: 30 to 65	Should have a Pap test every three years or HPV testing alone or in combination with Pap test (co-testing) every five years.
Cervical cancer: 65+	Stop screening at age 65 if last three Pap tests or last two co-tests (Pap plus HPV) within the previous 10 years were normal. If there is a history of an abnormal Pap test within the past 20 years, discuss continued screening with your doctor.
Colorectal cancer	At age 45 and continuing until 75, your doctor may suggest any one of these test options: ◦ Direct visualization tests — Colonoscopy — CT colonography — Flexible sigmoidoscopy ◦ Stool-based tests — Fecal immunochemical test (FIT) — Guaiac-based fecal occult blood test (gFOBT) — Multi-targeted stool DNA test (FIT-DNA)
Lung cancer (low-dose computed tomography LDCT)	Beginning at age 50 for those with a 20-pack-per-year smoking history and currently smoke or have quit within the past 15 years
Hepatitis B	Screen if at increased risk for infection
Hepatitis C	Screen once between the ages of 18 and 79
STIs — gonorrhea, chlamydia, syphilis	Gonorrhea and chlamydia: sexually active women aged 24 and under. Women over age 25 if at increased risk of infection. Syphilis: if at increased risk of infection.
Human immunodeficiency virus (HIV)	Older adults should be screened if at increased risk of infection. Women at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP).
Tuberculosis	Screen for latent infection if at increased risk

1 Caughey AB, Krist AH, Wolff TA, et al: *USPSTF Approach to Addressing Sex and Gender When Making Recommendations for Clinical Preventive Services. JAMA.* (November 16, 2021): pubmed.ncbi.nlm.nih.gov/34694343.
2 Height and weight are used to check body mass index (BMI). Checking someone's BMI helps determine if they are a healthy weight for their height, or if they are under or overweight.
3 Women should talk to their doctor and make a personal choice about the best age to start having mammograms and possibly screen every two years when older.

This guide is just for your information; it is not meant to take the place of medical care or advice. Some people may be at higher risk for health issues due to their family history, their race or ethnicity, or other reasons. Talk to your doctor if you have concerns about your health.

Please note: Coverage of these services varies by health plan.

Pregnancy

Within the first three months of pregnancy, it's important to visit a doctor to set up a prenatal care plan. At each prenatal visit, your doctor will check your health and the health of your baby. Your doctor may also talk to you about:

- What is safe to eat during pregnancy.
- How to safely exercise while pregnant.
- Avoiding tobacco, drugs, alcohol, and other substances.
- Breastfeeding and how to access lactation supplies and services after delivery if needed.

Testing for you

Your doctor may recommend the following tests and preventive screenings during pregnancy:

- Depression screenings (during and after pregnancy)
- Gestational diabetes screening at 24 weeks or later
- Preeclampsia* screening (to test for high blood pressure during pregnancy)
- Hematocrit/hemoglobin (blood count)
- Rubella immunity (to determine if you need the rubella vaccine after delivery)
- Rh(D) blood type and antibody testing (to see if your blood type and your baby's blood type are compatible). If you are Rh(D) negative, you may need to repeat this test between 24 and 28 weeks.
- Hepatitis B screening (recommended at first prenatal visit)
- HIV screening if your HIV status is unknown, including those who present in labor or at delivery. Individuals at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP)
- Syphilis
- Urine for asymptomatic bacteriuria

Testing for your baby

The following tests and others can check your baby for health concerns before they're born. Which tests you need and when you need them depend on your age as well as your medical and family history. Talk to your doctor about which tests you may need, what the results say about your baby, and the possible risks associated with each test.

- Amniocentesis (an ultrasound and testing of the fluid surrounding your baby)
- Cell-free DNA (a blood test to check for chromosomal abnormalities in the baby)
- Chorionic villus sampling (checks for birth defects)
- Ultrasound tests (to look at the baby in the womb). During the first three months, these are done along with blood tests to check the baby for chromosomal abnormality risk.

Vaccines

It's best to receive most vaccines before pregnancy. However, certain vaccines are recommended during pregnancy to boost your and your baby's immunity, including:

- Flu: If you are pregnant during flu season (October through March), your doctor may want you to get the inactivated flu shot.
- Tdap: Pregnant teens and adults need a Tdap vaccine during each pregnancy. It's best to receive the vaccine between weeks 27 and 36 of pregnancy, although it may be given at any time.

You should not get the following vaccines while pregnant:

- Measles, mumps, rubella (MMR)
- Varicella (chickenpox)

*If you have a high risk of preeclampsia, your doctor may recommend taking a low-dose aspirin to prevent other problems while you are pregnant.

Please note: Coverage of these services varies by health plan.

Adult screenings — men

Yearly wellness visits — adult men

During your annual visit, your doctor may perform or recommend certain screenings based on your age or medical history, including those on the chart below. Your doctor may also talk to you about:

- Diet and physical activity.
- Mental health, including depression.
- Oral and dental health.
- Tobacco use or how to quit.
- Avoiding secondhand smoke.
- Substance use, including the use of alcohol and prescription or illegal drugs.
- Skin cancer risks.
- Family planning, including:
  - Safe sex (counseling may be provided to prevent STIs in adults at increased risk).
  - Preventing unplanned pregnancy with a partner.
- Intimate partner violence.
- Minimizing exposure to UV radiation.
- Importance of exercise in adults over age 65 in preventing falls.

Keep in mind, the following recommendations are categorized by "men" and "women," and are driven by biological sex (male and female) rather than gender identity. Meet with your doctor to determine which recommendations best apply to you based on individual factors, such as your sex assigned at birth and current anatomy.[1]

Screening	When to receive screening
Height, weight, and BMI[2]	Each year or as your doctor suggests. Men with a high BMI (30 or more) should be offered intensive weight loss interventions to help increase exercise and improve eating habits.
Abdominal aortic aneurysm (enlarged blood vessels in the abdomen)	One time between ages 65 and 75 if you have ever smoked.
Blood pressure	Each year or as your doctor suggests. Recheck high readings at home.
Cardiovascular disease (CVD) risk assessment	As your doctor suggests from ages 40 to 75. Men who are at increased risk should be offered a low- to moderate-dose statin (cholesterol medicine). Lipid screening may be required to assess risk.
Colorectal cancer	From ages 45 to 75, your doctor may suggest one or more of these test options: ◦ Direct visualization tests — Colonoscopy — CT colonography — Flexible sigmoidoscopy ◦ Stool-based tests — Fecal immunochemical test (FIT) — Guaiac-based fecal occult blood test (gFOBT) — Multi-targeted stool DNA test (FIT-DNA)
Glucose screening for type 2 diabetes	As your doctor suggests from ages 35 to 70, especially if overweight or obese. Individuals with high blood sugar should talk to their doctor about intensive counseling interventions to promote a healthy diet and physical activity.
Hepatitis C	Screen once between the ages of 18 and 79
Hepatitis B	Screen if at increased risk for infection
HIV	As your doctor suggests between ages 19 and 65. Older adults should be screened if at increased risk of infection. Men at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP).
Syphilis	Screen if at increased risk of infection
Prostate cancer	From ages 55 to 69, talk with your doctor about the risks and benefits of prostate cancer tests.
Lung cancer (with low-dose computed tomography (LDCT))	Start screening at age 50 if you have a 20-pack-per-year smoking history and currently smoke or have quit within the past 15 years.
Tuberculosis	Screen for latent infection if at increased risk
Depression	Each year

1 Caughey AB, Krist AH, Wolff TA, et al: *USPSTF Approach to Addressing Sex and Gender When Making Recommendations for Clinical Preventive Services. JAMA.* (November 16, 2021): pubmed.ncbi.nlm.nih.gov/34694343.
2 Height and weight are used to check body mass index (BMI). Checking someone's BMI helps determine if they are a healthy weight for their height, or if they are under or overweight.

Suggested vaccination schedule

For additional information about vaccines, including the current recommendations on COVID-19 vaccinations, visit **cdc.gov/vaccines.**

Age to receive vaccine

Vaccine	Birth	1 to 2 months	2 months	4 months	6 months	6 to 18 months	12 to 15 months	15 to 18 months	19 to 23 months	4 to 6 years	11 to 12 years	13 to 18 years	19 to 59 years	60 to 64 years	65+ years
Hepatitis A							✔ Two-dose series between 12 and 23 months; taken 6 to 18 months apart								
Hepatitis B	✔	✔		✔		✔							✔		
Rotavirus			✔ Two- or three-dose series												
Diphtheria, tetanus, pertussis (DTaP)			✔	✔	✔			✔		✔					
Tetanus, diphtheria, pertussis (Td/ Tdap)											✔ Tdap		✔ Every 10 years		
Haemophilus influenza type b (Hib)			✔ 3 to 4 doses; first dose at 2 months, last dose at 12 to 15 months												
Influenza (flu)					✔ Suggested each year from 6 months to 65+ years of age; two doses at least four weeks apart are recommended for children between 6 months and 8 years who are receiving the vaccine for the first time										
Pneumococcal conjugate (PCV)			✔	✔	✔		✔								
Pneumococcal 13-valent conjugate (PCV13)															✔
Pneumococcal polysaccharide (PPSV23)															✔
Measles, mumps, rubella (MMR)							✔			✔					
Inactivated polio virus (IPV)			✔	✔		✔				✔					
Human papillomavirus (HPV)											✔ Two- or three-dose series				
Meningococcal											✔ MenACWY: Ages 11 to 12, booster at 16 MenB: Ages 16 to 23				✔
Varicella (chickenpox)							✔			✔					✔
Zoster													✔ Two-dose series for ages 50+; 2 to 6 months apart		

✔ Shows when vaccines are suggested

Hepatitis A (ages 2 to 18): If you or your child has not had this vaccine before, talk to your doctor about a catch-up vaccine.

Hepatitis B: The first dose should be given within 24 hours of birth if the birth was outside of a hospital. Children may receive an extra dose (four-dose series) at 4 months if the combination vaccine is used after the birth dose. Individuals aged 60 and older should discuss potential vaccination with their doctor.

Rotavirus (RV): Receive a two-dose or three-dose series (depending on the brand of vaccine used).

DTaP and Tdap (children through adults): If you or your child (age 7 or older) never received this vaccine, talk to the doctor about a catch-up vaccine.

Haemophilus influenza type b (Hib): Depending on the brand of vaccine, children should receive a three- or four-dose series.

Influenza (flu): Visit **cdc.gov/flu** to learn more about this vaccine. Children 6 months to 8 years getting the vaccine for the first time should receive two doses four weeks apart.

Pneumococcal conjugate (PCV)/ Pneumococcal 13-valent conjugate (PCV13)/ Pneumococcal polysaccharide (PPSV23): Talk to the doctor if your child aged 14 months to 59 months received an incomplete PCV series. Adults aged 65 and older and certain adults younger than 65 who are at risk should receive both a PCV13 and PPSV23. Ask your doctor what dose is best for you.

Measles, mumps, rubella (MMR): Teens and adults should be up to date on their MMR vaccines.

Inactivated polio virus (IPV): Children should receive four doses of this vaccine between 2 months and 6 years old.

Human papillomavirus (HPV): Children who are 11 to 12 years old receive two doses of the HPV vaccine at least six months apart. Teens and young adults who start the series later (ages 15 to 26) need three doses of the HPV vaccine to protect against cancer-causing HPV infection. Adults aged 27 to 45 should talk to their doctor to see if an HPV vaccine is right for them.

Meningococcal: When given to healthy teens who are not high risk for meningococcal disease, two doses of MenA,C,W,Y should be given. Vaccination is also recommended for children and adults at increased risk. Timing is based on the brand of vaccine used, the age the first dose was given, and individual risk factors. Individuals aged 16 to 23 who are not high risk should discuss getting a MenB vaccine with their doctor.

Varicella (chickenpox): Chickenpox vaccines are for children who have not had chickenpox.

Zoster: Two doses of the Shingrix (HZ/su) vaccine, given 2 to 6 months apart, is recommended for adults aged 50 and older, including those who previously received the Zostavax (shingles) vaccine.

Learn more about your plan and what services it covers by downloading the Sydney Health℠ mobile app or visiting anthem.com.

For additional information on various health and wellness topics, visit our blog at **anthem.com/blog**.