

MINIMUM ESSENTIAL COVERAGE PREVENTIVE CARE SERVICES

All Marketplace health plans and many other plans must cover the following list of preventive services without charging you a copayment or coinsurance. This is true even if you haven't met your yearly deductible.

IMPORTANT: These services are free only when delivered by a doctor or other provider in your plan's network.

Preventive Care Benefits for Children

1. [Alcohol and drug use assessments](#) for adolescents
2. [Autism screening](#) for children at 18 and 24 months
3. Behavioral assessments for children ages: [0 to 11 months](#), [1 to 4 years](#), [5 to 10 years](#), [11 to 14 years](#), [15 to 17 years](#)
4. Blood pressure screening for children ages: [0 to 11 months](#), [1 to 4 years](#), [5 to 10 years](#), [11 to 14 years](#), [15 to 17 years](#)
5. [Cervical dysplasia screening](#) for sexually active females
6. [Depression screening](#) for adolescents
7. [Developmental screening](#) for children under age 3
8. [Dyslipidemia screening](#) for children at higher risk of lipid disorders ages: [1 to 4 years](#), [5 to 10 years](#), [11 to 14 years](#), [15 to 17 years](#)
9. [Fluoride chemoprevention supplements](#) for children without fluoride in their water source
10. [Gonorrhea preventive medication](#) for the eyes of all newborns
11. [Hearing screening](#) for all newborns
12. Height, weight and body mass index (BMI) measurements for children ages: [0 to 11 months](#), [1 to 4 years](#), [5 to 10 years](#), [11 to 14 years](#), [15 to 17 years](#)
13. [Hematocrit or hemoglobin screening](#) for all children
14. [Hemoglobinopathies or sickle cell screening](#) for newborns
15. [Hepatitis B screening](#) for adolescents at high risk, including adolescents from countries with 2% or more Hepatitis B prevalence, and U.S.-born adolescents not vaccinated as infants and with at least one parent born in a region with 8% or more Hepatitis B prevalence: [11 – 17 years](#).
16. [HIV screening](#) for adolescents at higher risk
17. [Hypothyroidism screening](#) for newborns
18. [Immunization vaccines](#) for children from birth to age 18 — doses, recommended ages, and recommended populations vary:
 - Diphtheria, Tetanus, Pertussis (Whooping Cough)
 - Haemophilus influenzae type b
 - Hepatitis A
 - Hepatitis B
 - Human Papillomavirus (PVU)
 - Inactivated Poliovirus
 - Influenza (flu shot)
 - Measles
 - Meningococcal
 - Pneumococcal
 - Rotavirus
 - Varicella (Chickenpox)
19. [Iron supplements](#) for children ages 6 to 12 months at risk for anemia
20. [Lead screening](#) for children at risk of exposure
21. Medical history for all children throughout development ages: [0 to 11 months](#), [1 to 4 years](#), [5 to 10 years](#), [11 to 14 years](#), [15 to 17 years](#)
22. [Obesity screening and counseling](#)
23. Oral health risk assessment for young children ages: [0 to 11 months](#), [1 to 4 years](#), [5 to 10 years](#)
24. [Phenylketonuria \(PKU\) screening](#) for newborns
25. [Sexually transmitted infection \(STI\) prevention counseling and screening](#) for adolescents at higher risk
26. Tuberculin testing for children at higher risk of tuberculosis ages: [0 to 11 months](#), [1 to 4 years](#), [5 to 10 years](#), [11 to 14 years](#), [15 to 17 years](#)
27. [Vision screening](#) for all children

Preventive care benefits for women

For pregnant women or women who may become pregnant

1. [Anemia screening](#) on a routine basis
2. [Breastfeeding comprehensive support and counseling](#) from trained providers, and access to breastfeeding supplies, for pregnant and nursing women
3. [Contraception](#): Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, as prescribed by a health care provider for women with reproductive capacity (not including abortifacient drugs). This does not apply to health plans sponsored by certain exempt "religious employers." [Learn more about contraceptive coverage.](#)
4. [Folic acid supplements](#) for women who may become pregnant
5. [Gestational diabetes screening](#) for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes
6. [Gonorrhea screening](#) for all women at higher risk

7. [Hepatitis B screening](#) for pregnant women at their first prenatal visit
8. [Rh Incompatibility screening](#) for all pregnant women and follow-up testing for women at higher risk
9. [Syphilis screening](#)
10. [Expanded tobacco intervention and counseling](#) for pregnant tobacco users
11. [Urinary tract or other infection screening](#)

[Get more information about services for pregnant women from HealthFinder.gov](#)

Other covered preventive services for women

1. [Breast cancer genetic test counseling \(BRCA\)](#) for women at higher risk
2. [Breast cancer mammography screenings](#) every 1 to 2 years for women over 40
3. [Breast cancer chemoprevention counseling](#) for women at higher risk
4. [Cervical cancer screening](#) for sexually active women
5. [Chlamydia infection screening](#) for younger women and other women at higher risk
6. [Domestic and interpersonal violence screening and counseling](#) for all women
7. [Gonorrhea screening](#) for all women at higher risk
8. [HIV screening and counseling](#) for sexually active women
9. [Human Papillomavirus \(HPV\) DNA test](#) every 3 years for women with normal cytology results who are 30 or older
10. [Osteoporosis screening](#) for women over age 60 depending on risk factors
11. [Rh incompatibility screening](#) follow-up testing for women at higher risk
12. [Sexually transmitted infections counseling](#) for sexually active women
13. [Syphilis screening](#) for women at increased risk
14. [Tobacco use screening and interventions](#)
15. [Well-woman visits](#) to get recommended services for women under 65

Preventive Care Benefits for Adults

1. [Abdominal aortic aneurysm one-time screening](#) for men of specified ages who have ever smoked
2. [Alcohol misuse screening and counseling](#)
3. [Aspirin use](#) to prevent cardiovascular disease for men and women of certain ages
4. [Blood pressure screening](#)
5. [Cholesterol screening](#) for adults of certain ages or at higher risk
6. [Colorectal cancer screening](#) for adults over 50
7. [Depression screening](#)
8. [Diabetes \(Type 2\) screening](#) for adults with high blood pressure
9. [Diet counseling](#) for adults at higher risk for chronic disease
10. [Hepatitis B screening](#) for people at high risk, including people from countries with 2% or more Hepatitis B prevalence, and U.S.-born people not vaccinated as infants and with at least one parent born in a region with 8% or more Hepatitis B prevalence.
11. [Hepatitis C screening](#) for adults at increased risk, and one time for everyone born 1945 – 1965
12. [HIV screening](#) for everyone ages 15 to 65, and other ages at increased risk
13. [Immunization vaccines](#) for adults — doses, recommended ages, and recommended populations vary:
 - Diphtheria
 - Hepatitis A
 - Hepatitis B
 - Herpes Zoster
 - Human Papillomavirus (HPV)
 - Influenza (flu shot)
 - Measles
 - Meningococcal
 - Mumps
 - Pertussis
 - Pneumococcal
 - Rubella
 - Tetanus
 - Varicella (Chickenpox)
14. [Lung cancer screening](#) for adults 55 – 80 at high risk for lung cancer because they're heavy smokers or have quit in the past 15 years
15. [Obesity screening and counseling](#)
16. [Sexually transmitted infection \(STI\) prevention counseling](#) for adults at higher risk
17. [Syphilis screening](#) for adults at higher risk
18. [Tobacco Use screening](#) for all adults and cessation interventions for tobacco users