

**INSERT III**  
**FRESNO UNIFIED SCHOOL DISTRICT**  
**Employee Health Care Plan**  
**Preventive Services under Medical Plan Options A and B<sup>1</sup>**

**Preventive Services.** The chart on the following pages shows the Preventive Services that are covered by Medical Plan Options A and B. **The Preventive Services shown in the chart are covered by the Plan at 100% of Covered Charges only if you obtain the services from a Contract Provider.** This means that the services are covered at no cost to you, without you having to pay a Deductible or Coinsurance, **but only when these services are delivered by a Contract Provider.** Preventive services coverage for Prescription Drugs noted by an asterisk are covered at 100% with no copayment provided a physician writes a prescription even if they can be bought over the counter.

Some things you should know about the coverage of Preventive Care Services:

- If a Preventive Service is billed separately from an office visit, the plan may impose cost sharing on the office visit.
- If the Preventive Service is not billed separately from the office visit, and the office visit is primarily for the purpose of providing Preventive Service(s), then the Plan may not impose cost sharing on the office visit and will pay the office visit at 100% of Covered Charges if you use a Contract Provider.
- If the Preventive Service is not billed separately from the office visit, and the main purpose of the office visit is not for the purpose of providing Preventive Service(s), the Plan may impose cost sharing on the office visit. For example, if you go to a doctor because of a new ear infection, or continuing medical condition, the Plan may impose cost sharing on the office visit.
- In determining when and under what conditions a Preventive Service or item will be covered, the Plan is permitted to apply reasonable medical management techniques to determine the frequency, timing, method, treatment or setting of services under which coverage will be provided, to the extent that such limitations are not specified in relevant recommendations or guidelines mandated by PPACA by the U.S. Preventive Services Task Force (USPSTF).

**Note: Covered Preventive Services may be amended by the USPSTF, therefore, the listing may be changed in the future.**

Topic	The U.S. Preventive Services Task Force (USPSTF) Recommends
Abdominal aortic aneurysm screening: men	One-time screening for abdominal aortic aneurysm by ultrasonography in men aged 65 to 75 who have ever smoked.
Alcohol misuse counseling	Screening and behavioral counseling interventions to reduce alcohol misuse by adults, including pregnant women, in primary care settings.
Anemia screening: pregnant women	Routine screening for iron deficiency anemia in asymptomatic pregnant women.
* Aspirin to prevent CVD: men	The use of aspirin for men age 45 to 79 years when the potential benefit due to a reduction in myocardial infarctions outweighs the potential harm due to an increase in gastrointestinal hemorrhage.
* Aspirin to prevent CVD: women	The use of aspirin for women age 55 to 79 years when the potential benefit of a reduction in ischemic strokes outweighs the potential harm of an increase in gastrointestinal hemorrhage.
Bacteriuria screening: pregnant women	Screening for asymptomatic bacteriuria with urine culture for pregnant women at 12 to 16 weeks' gestation or at the first prenatal visit, if later.
Blood pressure screening in adults	Screening for high blood pressure in adults aged 18 and older.
BRCA screening, counseling about	Women whose family history is associated with an increased risk for deleterious mutations in BRCA1 or BRCA2 genes be referred for genetic counseling and evaluation for BRCA testing.

<sup>1</sup> Please refer to Kaiser's Evidence of Coverage booklet for covered Preventive Services under USPSTF.

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Topic	The U.S. Preventive Services Task Force (USPSTF) Recommends
Breast cancer preventive medication	Clinicians discuss chemoprevention with women at high risk for breast cancer and at low risk for adverse effects of chemoprevention. Clinicians should inform patients of the potential benefits and harms of chemoprevention.
Breast cancer screening	Mammography screening for women, with or without clinical breast examination, every 1-2 years for women aged 40 and older.
Breastfeeding counseling	Interventions during pregnancy and after birth to promote and support breastfeeding.
Cervical cancer screening	Screening for cervical cancer in women who have been sexually active and have a cervix.
Chlamydial infection screening: non-pregnant women	Screening for chlamydial infection for all sexually active non-pregnant young women aged 24 and younger and for older non-pregnant women who are at increased risk.
Chlamydial infection screening: pregnant women	Screening for chlamydial infection for all pregnant women aged 24 and younger and for older pregnant women who are at increased risk.
Cholesterol abnormalities screening: men 35 and older	Screening men aged 35 and older for lipid disorders.
Cholesterol abnormalities screening: men younger than 35	Screening men aged 20 to 35 for lipid disorders if they are at increased risk for coronary heart disease.
Cholesterol abnormalities screening: women 45 and older	Screening women aged 45 and older for lipid disorders if they are at increased risk for coronary heart disease.
Cholesterol abnormalities screening: women younger than 45	Screening women aged 20 to 45 for lipid disorders if they are at increased risk for coronary heart disease.
Colorectal cancer screening	Screening for colorectal cancer using fecal occult blood testing, sigmoidoscopy, or colonoscopy, in adults, beginning at age 50 years and continuing until age 75 years. The risks and benefits of these screening methods vary.
* Dental caries chemoprevention: preschool children (oral fluoride)	Primary care clinicians prescribe oral fluoride supplementation at currently recommended doses to preschool children older than 6 months of age whose primary water source is deficient in fluoride.
Depression screening: adolescents	Screening of adolescents (12-18 years of age) for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy (cognitive-behavioral or interpersonal), and follow-up.
Depression screening: adults	Screening adults for depression when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment, and follow-up.
Diabetes screening	Screening for type 2 diabetes in asymptomatic adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg.
* Folic acid supplementation	All women planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 mg (400 to 800 µg) of folic acid.
Gonorrhea prophylactic medication: newborns	The USPSTF strongly recommends prophylactic ocular topical medication for all newborns against gonococcal ophthalmia neonatorum.
Gonorrhea screening: women	Clinicians screen all sexually active women, including those who are pregnant, for gonorrhea infection if they are at increased risk for infection (that is, if they are young or have other individual or population risk factors).

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Topic	The U.S. Preventive Services Task Force (USPSTF) Recommends
Healthy diet counseling	Intensive behavioral dietary counseling for adult patients with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease. Intensive counseling can be delivered by primary care clinicians or by referral to other specialists, such as nutritionists or dietitians.
Hearing loss screening: newborns	Screening for hearing loss in all newborn infants.
Hemoglobinopathies screening: newborns	Screening for sickle cell disease in newborns.
Hepatitis B screening: pregnant women	Screening for hepatitis B virus infection in pregnant women at their first prenatal visit.
HIV screening	Clinicians screen for human immunodeficiency virus (HIV) all adolescents and adults at increased risk for HIV infection.
Hypothyroidism screening: newborns	Screening for congenital hypothyroidism in newborns.
* Iron supplementation in children	Routine iron supplementation for asymptomatic children aged 6 to 12 months who are at increased risk for iron deficiency anemia.
Obesity screening and counseling: adults	Clinicians screen all adult patients for obesity and offer intensive counseling and behavioral interventions to promote sustained weight loss for obese adults.
Obesity screening and counseling: children	Clinicians screen children aged 6 years and older for obesity and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.
Osteoporosis screening: women	Women aged 65 and older be screened routinely for osteoporosis, that routine screening begin at age 60 for women at increased risk for osteoporotic fractures.
PKU screening: newborns	Screening for phenylketonuria (PKU) in newborns.
Rh incompatibility screening: first pregnancy visit	Rh (D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care.
Rh incompatibility screening: 24-28 weeks gestation	Repeated Rh (D) antibody testing for all unsensitized Rh (D)-negative women at 24-28 weeks' gestation, unless the biological father is known to be Rh (D)-negative.
STIs counseling	High-intensity behavioral counseling to prevent sexually transmitted infections (STIs) for all sexually active adolescents and for adults at increased risk for STIs.
* Tobacco use counseling and interventions: non-pregnant adults and pregnant women (smoking cessation aids)	Clinicians ask about tobacco use and provide tobacco cessation interventions for those who use tobacco products.
Syphilis screening: non-pregnant persons	Clinicians screen persons at increased risk for syphilis infection.
Syphilis screening: pregnant women	Clinicians screen all pregnant women for syphilis infection.
Visual acuity screening in children	Screening to detect amblyopia, strabismus, and defects in visual acuity in children younger than age 5 years.