

Using your preventive benefits

Your LifeWise Health Plan of Washington plan covers in-network preventive care in full. So, go ahead and use your preventive benefits. They're a good way to maintain and even improve your health.

When the listed screenings, tests, and services are billed by your provider as routine preventive services, your plan covers them in full. Under the Affordable Care Act (ACA), your LifeWise health plan covers these preventive services with no out-of-pocket costs to you. This means you won't have to pay a copay or coinsurance for the services listed. A provider in your plan's network must deliver these services.

For more specific information about your coverage and guidelines, see the back of this brochure.

Adults 18 and older

SERVICES, SCREENINGS, AND TESTS

- **Wellness exams** visits for routine wellness or physical exams
- **Abdominal aortic aneurysm** for men ages 65 to 74 who have ever smoked; one-time screening
- **Alcoholism screening and counseling**
- **Blood pressure screening**
- **Breast cancer screening:** screening mammography
- **Cholesterol test:** for adults of certain ages or those at higher risk
- **Colorectal cancer screenings** starting at age 45 through age 75; sooner than age 45 for those at higher risk of colon cancer. Colorectal screening options include:
 - **Home tests:** fecal occult blood (FOBT), fecal immunochemical (FIT), and stool DNA (Cologuard¹)
 - **Provider's office:** sigmoidoscopy
 - **Outpatient hospital, ambulatory surgical center:** colonoscopy (If your provider recommends a screening colonoscopy, costs for related services such as pre-colonoscopy consultation, anesthesia your provider considers medically appropriate for you, removal of polyps, and pathology are included.) Follow-up colonoscopy following a positive home test.
- **Depression screening**
- **Diabetes (type 2) and prediabetes screening**
- **Domestic violence screening and counseling**
- **Fall prevention** for ages 65 and older
- **Healthy eating assessment and dietary counseling**
- **Hepatitis B screening** for those at higher risk
- **Hepatitis C screening** for those at higher risk
- **HIV (human immunodeficiency virus) screening** for individuals age 15 or older or those at increased risk.
- **HIV pre-exposure prophylaxis (PrEP) therapy:** certain HIV PrEP tests, screening, counseling, and medication are covered at no cost when used as a preventive measure for those receiving or being evaluated for HIV PrEP drug coverage.

These include:

- HIV and sexually transmitted infection (STI) testing
 - Hepatitis B and C testing
 - Creatinine testing and calculated estimated creatinine clearance (eCrCl) or glomerular filtration rate (eGFR)
 - Pregnancy testing
 - STI screening and counseling
 - Adherence counseling
 - See the Medications and supplements section for drug coverage
- **Latent tuberculosis infection screening** for those at higher risk
 - **Lung cancer screening** for ages 50 to 80 who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years²
 - **Nicotine dependency screening and counseling** for quitting smoking or chewing tobacco
 - **Obesity screening and counseling** for weight loss
 - **Prostate cancer screening:** prostate-specific antigen (PSA) blood test
 - **Sexually transmitted infection (STI) counseling** for those at higher risk
 - **Syphilis infection screening** for those at higher risk for infection
 - **Unhealthy drug use screening:** Screening refers to asking questions about unhealthy drug use, not testing biological specimens

¹ Cologuard services may be subject to additional out-of-pocket expense.

² Prior authorization (a preapproval from your health plan) is required.



Health Plan of Washington

Adults 18 and older (continued)

MEDICATIONS AND SUPPLEMENTS

- **Aspirin:** for pregnant women who are at high risk for preeclampsia; over-the-counter, generic aspirin-only products (81 mg/day)¹
- **Birth control pills:** for birth control devices and family planning; generic, single-source brand, and multi-source brand oral contraceptives (including emergency contraception), cervical caps, patches, diaphragms, insertion or removal of IUD (intrauterine device), contraceptive implants, and injectable contraception. Requires a written prescription. Over-the-counter birth control (for example: condoms and sponges) does not require a written prescription. Certain birth control mobile apps are also covered. See benefit booklet for additional coverage detail.
- **Folic acid:** for women who are pregnant or are considering pregnancy. Generic only - 0.4 -0.8 mg only¹
- **HIV pre-exposure prophylaxis (PrEP) drug coverage:** Descovy, emtricitabine-tenofovir (200 mg-300 mg), Truvada (200 mg-300 mg).
- **Pre-colonoscopy cleansing preparations:** for those between the ages of 45 and 75; generic or single-source brands; fill limit of 2 every 365 days (over-the-counter drugs are not covered as a preventive service)¹
- **Statins:** for prevention of cardiovascular diseases; generic statins for those between the ages of 40 and 75
- **Tobacco cessation:** prescription drugs only, including bupropion (generic Zyban), varenicline, NRT (nicotine replacement therapy) nasal spray, or NRT inhaler¹. Limited to 180 supply per year.

Women

ADDITIONAL COVERED PREVENTIVE SERVICES

- **Birth control:** visits for birth control devices and family planning; generic, single-source brand and multi-source brand oral contraceptives (including emergency contraception), cervical caps, patches, diaphragms, IUDs, insertion or removal of IUD (intrauterine device), contraceptive implants, and injectable contraception. Requires a written prescription. Over-the-counter birth control (for example: condoms and sponges) does not require a written prescription. Certain birth control mobile apps are also covered. See benefit booklet for additional coverage detail.
- **Bone density (osteoporosis) screening**
- **Breast cancer and ovarian cancer (BRCA) genetic counseling and testing:** preapproval for testing required; contact LifeWise customer service
- **Breast cancer (chemoprevention) counseling** for women at higher risk
- **Breast cancer preventive medications** for ages 35 and older or those at higher risk: raloxifene, Soltamox, tamoxifen, or aromatase inhibitors
- **Breast cancer screening:** screening mammography
- **Cervical cancer screening**
 - Ages 21 to 65: cytology (pap test) every 3 years
 - Ages 30 to 65: screening for human papillomavirus (HPV) every 5 years or cotesting for HPV and cytology every 5 years
- **Chlamydia infection screening**
- **Domestic violence screening and counseling**
- **Gonorrhea screening:** for those at higher risk
- **HPV (human papillomavirus) screening test**
- **Perinatal/postpartum depression:** counseling interventions for those at higher risk
- **Sterilization**

¹Requires a written prescription

Please also see Medications and Supplements section above for covered drugs.

VACCINATIONS

- **Chicken pox (Varicella)**
- **COVID-19**
- **Flu (Influenza)**
- **Hepatitis A**
- **Hepatitis B**
- **HPV (Human papillomavirus)**
- **Meningitis (Meningococcal)**
- **MMR (Measles, mumps, rubella)**
- **Pneumonia (Pneumococcal)**
- **RSV (Respiratory Syncytial Virus):** for adults age 60 and older and pregnant women
- **Shingles (Herpes zoster)**
- **Td (Diphtheria toxoids)**
- **Tdap (Tetanus, diphtheria, pertussis)**

Recommended age and frequency varies. Talk with your provider about tests, screenings, and vaccinations that are right for you.

Pregnant Women

ADDITIONAL COVERED PREVENTIVE SERVICES

- **Anemia screening**
- **Bacteriuria urinary tract infection screening**
- **Breastfeeding interventions** to support and promote breastfeeding before and after childbirth
- **Breast pumps and supplies** (single or double styles)
- **Chlamydia and gonorrhea screening**
- **Folic acid** for women who are pregnant or are considering pregnancy. Generic only; 0.4-0.8 mg only¹
- **Gestational diabetes screening**
- **Hepatitis B infection screening**
- **Pre-pregnancy, prenatal, and postpartum visits**
- **Rh (antibody) incompatibility testing**
- **RSV (Respiratory Syncytial Virus)** for adults age 60 and older and pregnant women
- **Syphilis testing**

Children and teens

For children under age 18, routine exams, vaccinations, and screenings listed below are covered in full when received from a provider in your plan's network.

SERVICES, SCREENINGS, AND TESTS

- **Well-baby exam:** from birth to 3 years
- **Well-child exam:** ages 4 to 18
- **Anemia screening**
- **Annual alcohol and drug use screening**
- **Autism screening**
- **Behavioral issues**
- **Bilirubin screening** for newborns through the 28th day
- **BMI:** height, weight, and body mass
- **Cervical dysplasia:** for sexually active females
- **Depression, anxiety, and suicide risk screening**
- **Developmental screening**
- **Domestic violence screening and counseling**
- **Hearing screening**
- **Hepatitis B screening** for those at higher risk
- **HIV (human immunodeficiency virus) screening** for individuals age 15 or older or those at increased risk
- **HIV pre-exposure prophylaxis (PrEP) therapy:** certain HIV PrEP tests, screening, counseling, and medication are covered at no cost when used as a preventive measure for those receiving or being evaluated for HIV PrEP drug coverage.
These include:
 - HIV and sexually transmitted infection (STI) testing
 - Hepatitis B and C testing
 - Creatinine testing and calculated estimated creatinine clearance (eCrCl) or glomerular filtration rate (eGFR)
 - Pregnancy testing
 - STI screening and counseling
 - Adherence counseling
 - See the Medications and supplements section for drug coverage
- **Hypothyroidism:** congenital; lack of thyroid secretions
- **Lead screening** for children at risk of exposure
- **Lipid disorders** pertaining to cholesterol and triglycerides
- **Metabolic screening for newborns (such as PKU):** phenylketonuria is an inherited metabolic deficiency
- **Obesity screening and counseling** for weight loss
- **Oral health risk assessment and fluoride varnish to primary teeth:** completed during routine physical exam
- **Sexually transmitted infection (STI) prevention counseling**
- **Sickle cell anemia and trait for newborns:** hemoglobinopathies
- **Syphilis infection screening** for non-pregnant adolescents who are at increased risk for infection
- **Tuberculin (TB) testing**
- **Vision screening**

VACCINATIONS

- **Chicken pox** (Varicella)
- **COVID-19**
- **DTap** (Diphtheria, tetanus, pertussis)
- **DTaP-IPV-Hib-HepB** (Diphtheria, tetanus, pertussis, polio, Haemophilus influenza type B, hepatitis B)
- **Flu** (Influenza)
- **Hib** (Haemophilus influenza type b)
- **Hepatitis A**
- **Hepatitis B**
- **HPV** (Human papillomavirus)
- **IPV** (Inactivated polio virus)
- **Meningitis** (Meningococcal)
- **MMR** (Measles, mumps, rubella)
- **Pneumonia** (Pneumococcal)
- **Rotavirus**
- **RSV** (Respiratory Syncytial Virus) infants younger than 8 months, and infants 8 months to 19 months at increased risk
- **Tdap** (Tetanus, diphtheria, pertussis)

MEDICATIONS AND SUPPLEMENTS

- **Fluoride:** age 6 months through 16 years. Generic only. Requires a written prescription.
- **Iron supplements:** over-the-counter, liquid form only; from birth up to 12 months old.
- **HIV pre-exposure prophylaxis (PrEP) drug coverage:** Descovy, emtricitabine-tenofovir (200 mg-300mg), Truvada (200 mg-300 mg)

Helpful tips

When tests or screenings are not preventive

Your preventive benefits offer full coverage for many tests, screenings, and vaccinations. During your preventive exam, your provider may find an issue or problem that requires further testing or screening for a proper diagnosis to be made. Also, if you have a chronic disease, your provider may check your condition with tests. These types of screenings and tests help to diagnose or monitor your illness. These diagnostic tests are not covered by your preventive benefits and often require you to pay a greater share of the costs.

Anesthesia for preventive colonoscopies

If you are ready to schedule a preventive colonoscopy, you should know how your anesthesia for this screening will be covered. Anesthesia services performed in connection with a preventive colonoscopy are covered if the attending provider determines that anesthesia would be medically appropriate for you.

These services are based on guidelines required under state or federal law.

The guidelines are changed from time to time and come from:

- Services that the U.S. Preventive Services Task Force has given an A or B rating
- Vaccinations that the Centers for Disease Control and Prevention recommends
- Screening and other care for women, babies, children, and teens that the Health Resources and Services Administration recommends
- Services that meet legal requirements in Washington state

This is only a summary. Consult your benefit booklet for confirmation of benefits and coverage for these services.

Vaccination schedules: [cdc.gov/vaccines/schedules](https://www.cdc.gov/vaccines/schedules)

For more specific information, go to this government website: [healthcare.gov/coverage/preventive-care-benefits/](https://www.healthcare.gov/coverage/preventive-care-benefits/)

See our preventive care medical policy: [lifewisewa.com/medicalpolicies/10.01.523.pdf](https://www.lifewisewa.com/medicalpolicies/10.01.523.pdf)



Discrimination is Against the Law

LifeWise Health Plan of Washington (LifeWise) complies with applicable Federal and Washington state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. LifeWise does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. LifeWise provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats, other formats). LifeWise provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact the Civil Rights Coordinator. If you believe that LifeWise has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation, you can file a grievance with: Civil Rights Coordinator — Complaints and Appeals, PO Box 91102, Seattle, WA 98111, Toll free: 855-332-6396, Fax: 425-918-5592, TTY: 711, Email AppealsDepartmentInquiries@LifeWiseHealth.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Ave SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. You can also file a civil rights complaint with the Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint Portal available at <https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>, or by phone at 800-562-6900, 360-586-0241 (TDD). Complaint forms are available at <https://fortress.wa.gov/oic/onlineservices/cc/pub/complaintinformation.aspx>.

Language Assistance

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-817-3056 (TTY: 711).

注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 800-817-3056 (TTY: 711)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 800-817-3056 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 800-817-3056 (TTY: 711) 번으로 전화해 주십시오.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 800-817-3056 (телетайп: 711).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 800-817-3056 (TTY: 711).

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки.

Телефонуйте за номером 800-817-3056 (телетайп: 711).

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតថ្លៃ គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 800-817-3056 (TTY: 711)។

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。800-817-3056 (TTY:711) まで、お電話にてご連絡ください。

800-817-3056 (: 711).

XIYYEEFFANNA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 800-817-3056 (TTY: 711).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 800-817-3056 (رقم هاتف الصم والبكم: 711).

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 800-817-3056 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 800-817-3056 (TTY: 711).

ໄປດອກຸບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ຄ່າ, ຄວນມີພ້ອມໃຫ້ທ່ານ. ໂທ 800-817-3056 (TTY: 711).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 800-817-3056 (TTY: 711).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 800-817-3056 (ATS : 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 800-817-3056 (TTY: 711).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 800-817-3056 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 800-817-3056 (TTY: 711).

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 800-817-3056 (TTY: 711) تماس بگیرید.