

Preventive health guidelines 2024

Take Steps Today Toward A Healthier Future.

Healthy Blue pays for certain tests to find diseases early, routine wellness exams, and shots to help you and your family stay well. This is called preventive care.

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

- American Academy of Family Physicians (AAFP)
- American Academy of Pediatrics (AAP) Bright Futures
- 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)

Your plan may not pay for all the services and treatments listed. To learn more about what your plan covers:

To learn more about what your plan covers:

- Check the member handbook
- Call Member Services at the number on your ID card
- Visit healthybluenc.com

Always receive personal medical advice from your doctor.



This guide does not mention every condition and treatment.

Ask the doctor which exams, tests, and vaccines are right for you or your child, when to receive them, and how often.



Well-baby visits

Infants need to be seen by a doctor at birth, at the following ages, and as the doctor suggests:

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



Birth–2 years

Babies who leave the hospital less than two days (48 hours) after birth need to be seen by a doctor within 2 to 4 days after being born. To prevent infection, all infants should receive an eye ointment treatment. :

- A full-body exam
- Vaccines
- Other tests and screenings as needed, including those listed below:
 - Nutrition and feeding
 - Parent and family health and well-being
 - Importance of minimizing exposure to ultraviolet (UV) radiation
- Newborn care, safety and development

Screenings	When to Receive Them
Weight, length and head measurement	At each visit
BMI percentile*	At 24 months
Newborn metabolic, such as PKU, (when the body is unable to break down protein), sickle cell (an inherited blood disorder) and thyroid screening	Birth–2 months (best checked at 3-5 days) Bilirubin at birth (checks for newborn jaundice)
Critical congenital heart defect (birth defects of the heart)	At birth
Development — brain, body and behavior	At each visit
Hearing	As a newborn and at each visit
Vision	At each visit
Blood pressure	Check for risks 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 old). Fluoride prescription based on your drinking water (from 6 to 24 months old).
Hemoglobin or hematocrit (blood count)	Risk assessment at 4 months. Screen once at 12 months. Check for risks as the doctor suggests.
Lead testing	At 12 and 24 months. Check for risks as the doctor suggests.
Lipid disorder (cholesterol problems)	Check for risks at 24 months
Autism (a condition that affects social skills and the way a person communicates)	At 18 and 24 months
Hepatitis B	Check for risks at each visit
Postpartum depression (after a parent gives birth)	At 1, 2, 4 and 6 months
Tuberculosis	Check for risks and test as the doctor suggests

Well-Child Visits

Depending on your child’s age, the doctor may talk with you about:

- How to promote healthy nutrition
- Exercise, growth, safety and healthy habits
- Any learning or school issues
- Emotional and mental health
- Family and home living issues
- Importance of minimizing exposure to UV radiation

During the visit, your child may receive:

- A full-body exam
- Vaccines
- Other tests and screenings



Age 2 ½–
10 years

Screenings	When to Receive Them
Height, weight, BMI percentile*	Each year
Development — body, brain and behavior	At each visit
Anxiety	Each year beginning at age 8
Vision	Each year
Hearing	Each year beginning at age 4 Risk assessments at each visit before age 4
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)
Lead testing	Check for risks through age 6
Hemoglobin or hematocrit (blood count)	Check for risks each year
Blood pressure	Each year starting at age 3 Check for risks before age 3
Lipid disorder (cholesterol problems)	Once between ages 9–11 Check for risks at all other ages
Hepatitis B	Check for risks at each visit
Tuberculosis	Check for risks and test as the doctor suggests

* 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. BMI percentile is used in children ages 2 to 19 to see how they compare to other children.



Well-Child Visits

Depending on age, the doctor may talk about:

- **Growth and development**, such as oral health habits, body image, healthy eating, physical activity, and sleep.
- **Emotional well-being**, including mood control and overall mental health.
- **Safe sex**, especially reducing risks of sexually transmitted infections and diseases (STIs and STDs) and pregnancy.
- **Firearm safety** if you own or are around guns.
- **Substance use**, like drinking alcohol or using tobacco, e-cigarettes, or prescription or illegal drugs.
- **School performance.**
- **Family and home living issues.**
- **Safety**, such as seat belt use, helmet use, and sun protection.
- **Intimate partner violence.**
- **Importance of minimizing exposure to UV radiation.**

During the visit, the doctor may give:

- A full-body exam
- Vaccines
- Other tests and screenings



Ages 11–20 years

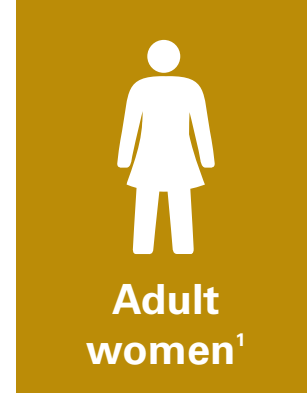
Screenings	When to Receive Them
Height, weight, BMI*	Percentile to age 19, then BMI each year
Development — mind, body and behavior	Each year
Depression	Each year starting at age 12
Blood pressure	Each year
Vision	Each year
Hearing	Screen with audiometry, once at 11–14, 15–17, and 18–21 years
Oral/dental health	Referral to a dentist each year Fluoride prescription based on your drinking water (between ages 11 to 16)
Hemoglobin or hematocrit (blood count)	Check for risks each year
Lipid disorder (cholesterol problems)	Once between ages 9 to 11 Once between ages 17 to 21 Risk assessment every other year
STIs, including chlamydia and gonorrhea	Each year starting at age 11, if sexually active
Syphilis	Screen in those at increased risk of infection Screen once between ages 15 to 18. Check for risks each year.
HIV	People who are at high risk of getting HIV should be offered pre-exposure prophylaxis (PrEP).
Substance use disorder and tobacco addiction	Check for risks each year starting at age 11
Tuberculosis	Check for risks each year and test as your doctor suggests
Hepatitis C	Screen between the ages of 18 to 19 years. Check for risks each year.
Hepatitis B	Check for risks each year. Screen if at increased risk of infection.
Cervical dysplasia	Pap test beginning at age 21
Sudden cardiac arrest/death	Risk assessment each year beginning at age 11.

* 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. BMI percentile is used in children ages 2 to 19 to see how they compare to other children.

Wellness Visits

During your visit, the doctor may talk with you about:

- Diet and physical activity
- Mental health, including depression
- Oral and dental health
- Tobacco use, or how to quit
- Avoiding secondhand smoke
- Drinking alcohol or using drugs
- Skin cancer risks
- Family planning, including:
 - Safe sex counseling may be provided to prevent sexually transmitted infections in adults at increased risk)
 - Birth control to help avoid unwanted pregnancy
 - Spacing out pregnancies to have the best birth outcomes
 - Folic acid supplements for people of childbearing age



- Intimate partner violence
- Importance of minimizing exposure to UV radiation
- Importance of exercise in adults over age 65 to prevent falls

You may also receive vaccines and these screenings:

Screening	When to Receive Them
Height, weight, BMI³	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.
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.
Breast cancer risk	As your doctor suggests in women 35 years and older at increased risk for breast cancer. 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** (breast X-ray)	Each year for ages 40 to 65+ Consider screening every 2 years from ages 50 to 74
Cardiovascular disease (CVD) risk assessment	As your doctor suggests from ages 40 to 75 years. Women who are at increased risk should be offered a low- to moderate-dose statin (cholesterol medicine). Lipid screening may be required to assess risk.
Cervical cancer	For ages 21 to 29, Pap test every 3 years. For ages 30 to 65, a Pap test every 3 years, a human papillomavirus (HPV) test alone, or a combination Pap and HPV test every 5 years. Stop testing at age 65 if the last 3 Pap tests or last 2 co-tests (Pap plus HPV) within the last 10 years were normal. If there was an abnormal Pap test within the past 20 years, talk with your doctor.

³ 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.

⁴ 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.

Screening	When to Receive Them
Colorectal cancer (of the colon and rectum)	<p>From ages 45 to 75, your doctor may suggest one or more of these test options:</p> <p>Stool (feces) tests:</p> <ul style="list-style-type: none"> • Fecal immunochemical test (FIT) • FIT-DNA: stool and DNA combo test • Guaiac-based fecal occult blood test (gFOBT) <p>Visual tests:</p> <ul style="list-style-type: none"> • Colonoscopy (using a small camera on the end of a flexible tube to look at your colon) • CT colonography (using a CT scanner to take images of the colon) • Flexible sigmoidoscopy (using a small camera on the end of a flexible tube to look at the last part of your colon, called the sigmoid colon)
Chlamydia and gonorrhea	If sexually active and age 24 or younger Age 25 and older if at increased risk for infection
Syphilis	Screen in those at increased risk of infection
Hepatitis B	Screen if at increased risk for infection
HIV	As your doctor suggests between ages 19 to 60 years. People who are at high risk of getting HIV should be offered pre-exposure prophylaxis (PrEP).
Glucose (blood sugar) 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 between ages of 18 to 79 years.
Osteoporosis (checks how dense your bones are)	Testing should start no later than age 65. Women in menopause should talk to their doctor about osteoporosis and have the test when at risk.
Lung cancer (with low-dose computed tomography [LDCT])	Beginning at age 50 in those with a 20-pack smoking history and currently smoke or have quit within the past 15 years
Tuberculosis	Screen for latent infection in those at increased risk
Depression	Each year

¹ Recommendations are stratified by “men” and “women,” although the net benefit estimates are driven by biological sex (i.e., male/female) rather than gender identity. Persons should consider their sex at birth and current anatomy and consult with their own clinician, if necessary, to determine which recommendation best applies to them.¹

² Caughey AB, Krist AH, Wolff TA, et al. USPSTF Approach to Addressing Sex and Gender When Making Recommendations for Clinical Preventive Services. JAMA. 2021; 326(19):1953-1961.

Wellness visits

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

- What to eat
- How to be active when pregnant
- Avoiding tobacco, drugs, alcohol, and other substances
- Breastfeeding, lactation supplies and counseling

Testing:

Based on your past health, your doctor may want you to have these screenings:

- **Depression** screenings (done during and after pregnancy)
- **Diabetes** screening for gestational diabetes at 24 weeks or later
- **Preeclampsia**¹ (high blood pressure that causes other problems during pregnancy)
- **Hematocrit/hemoglobin** (blood count)
- **Rubella immunity** (to find out which women need the rubella, aka German measles, vaccine after giving birth)
- **Rh(D) blood type and antibody testing** (checks to see if your blood type and your baby's blood type are compatible) If Rh(D) negative, repeat test at 24 to 28 weeks.
- **Hepatitis B** screening recommended at first prenatal visit
- **HIV** screening recommended in all pregnant people whose HIV status is unknown, including those who present in labor or at delivery. People who are at high risk of getting HIV should be offered pre-exposure prophylaxis (PrEP).
- **Syphilis**
- **Urine** for asymptomatic bacteriuria, as your doctor suggests

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.

Other tests and screenings:

- **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)



Pregnancy

- **Chorionic villus sampling** (checks for birth defects and more)
- **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 and more.

These and other tests can check the baby for health concerns. The right tests and the right times to do them depend on:

- Your age
- Your medical history and family history

Talk to your doctor about:

- Which tests may be best for you
- What the tests can tell you about your baby
- Any risks

Vaccines:

- **Flu:** If you are pregnant during flu season (October through March), your doctor may want you to have the inactivated (killed) 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, although it may be given at any time during pregnancy.

It's best to receive most vaccines before pregnancy. Women should check with their doctor to make sure their vaccines are up to date.

You should NOT get these vaccines while you are pregnant:

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

Wellness visits



During your visit, the doctor may talk with you about:

- Diet and physical activity
- Mental health, including depression
- Oral and dental health
- Tobacco use, or how to quit
- Avoiding secondhand smoke
- Drinking alcohol and using drugs
- Skin cancer risks
- Family planning, including:
 - Safe sex (counseling may be provided to prevent sexually transmitted infections in adults at increased risk) and preventing unwanted pregnancy with a partner
- Intimate partner violence
- Importance of minimizing exposure to UV radiation
- Importance of exercise in adults over age 65 to prevent falls

You may also receive vaccines and these screenings:

Screening	When to receive them
Height, weight, BMI ³	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 for ages 65-75 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 years. 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 (of the colon and rectum)	From ages 45 to 75, your doctor may suggest one or more of these test options <div><div>Stool (feces) tests:<ul style="list-style-type: none">• Fecal immunochemical test (FIT)• FIT-DNA: stool and DNA combo test• Guaiac-based fecal occult blood test (gFOBT)</div><div>Visual tests:<ul style="list-style-type: none">• Colonoscopy (using a small camera on the end of a flexible tube to look at your colon)• CT colonography (using a CT scanner to take images of the colon)</div><div><ul style="list-style-type: none">• Flexible sigmoidoscopy (using a small camera on the end of a flexible tube to look at the last part of your colon, called the sigmoid colon)</div></div>

Screening	When to receive them
Glucose (blood sugar) 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 between the ages of 18 to 79 years
Hepatitis B	Screen if at increased risk for infection
HIV	As your doctor suggests between ages 19 to 60 years. People who are at high risk of getting HIV should be offered pre-exposure prophylaxis (PrEP).
Syphilis	Screen in those 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))	Beginning at age 50 in those with a 20-pack smoking history and currently smoke or have quit within the past 15 years
Tuberculosis	Screen for latent infection in those at increased risk
Depression	Each year

¹ Recommendations are stratified by “men” and “women,” although the net benefit estimates are driven by biological sex (i.e., male/female) rather than gender identity. Persons should consider their sex at birth and current anatomy and consult with their own clinician, if necessary, to determine which recommendation best applies to them.¹

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Suggested vaccine schedule

For more info about vaccines and the current recommendations on COVID-19 vaccinations, visit [cdc.gov/vaccines](https://www.cdc.gov/vaccines).

Vaccines	Age									
	Birth	1-2 months	2 months	4 months	6 months	6-18 months	12-15 months	15-18 months	19-23 months	4-6 years
Hepatitis B	✓	✓				✓				
Rotavirus (RV)			✓ 2-dose or 3-dose series							
Diphtheria, tetanus, pertussis (DTaP)			✓	✓	✓			✓		✓
Tetanus, diphtheria, pertussis (Td/Tdap)										
Haemophilus influenzae type b (Hib)			✓ 3-4 doses between 2–15 months with 1st dose at 2 months, last dose at 12-15 months							
Pneumococcal conjugate (PCV13)			✓	✓	✓		✓			
Inactivated polio virus (IPV)			✓	✓		✓				✓
Influenza (flu)					Suggested each year from 6 months–65+ years; recommended for children between 6 months – 8 first time					
Measles, mumps, rubella (MMR)							✓			✓
Varicella (chickenpox)							✓			✓
Hepatitis A							✓ 2-dose series between 12–23 months; taken 6–18 months apart			
Human papillomavirus (HPV)										
Meningococcal										
Pneumococcal polysaccharide (PCV15, PCV20, PPSV23)										
Zoster (HZ/su) recombinant vaccine										



11-12 years	13-18 years	19-64 years	65+ years
		✓	
✓ Tdap		✓ Every 10 years	
2 doses at least 4 weeks apart are years old having the vaccine for the			
✓ 2-3 dose series	✓ Booster at age 16. MenB-FHb at ages 16 to 23		
		✓	
		✓ 2-dose series for ages 50+; 2–6 months apart	

Hepatitis A (ages 2 to 18): Minimum of 6 months between the two doses. If you or your child never received 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 ages 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).

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 influenzae type b (Hib): Receive a three-dose or four-dose series (depending on the brand of vaccine used).

Pneumococcal conjugate (PCV): Talk to the doctor if your child ages 14 months to 59 months received an incomplete PCV13 series.

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

Measles, mumps, rubella (MMR), and varicella (chickenpox): Teens and adults should be up to date on their MMR vaccines. Chickenpox vaccines are for children who have not had chickenpox.

Human papillomavirus (HPV): Children who are 11 to 12 years old receive two doses of the HPV vaccine at least six months apart. (The vaccine series can start at age 9.) Teens and young adults who start the series later (at ages 15 to 26) need three doses of HPV vaccine to protect against cancer-causing HPV infection. Adults ages 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 Men A,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, age first dose was received and individual risk factors. For MenB, individuals age 16 to 23 who are not high risk should discuss receiving a MenB vaccine with their doctor.

Pneumococcal (PCV15, PCV20, PPSV23): In adults age 65 and older who have not received a PCV vaccine. If you have previously had a PSV13 vaccination, ask your doctor what dose is best for you.

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



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Puede obtener materiales gratuitos en letra grande y otras ayudas y servicios auxiliares. Llame al **844-594-5070 (TTY 711)**. Si el inglés no es su lengua nativa, dispone de servicios gratuitos de interpretación. Llame al **844-594-5070 (TTY 711)**.

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如果英語不是您的第一語言，我們可以提供協助。請致電 **844-594-5070 (TTY 711)**。