

# Quick Reference Guide

Your CIGNA plan focuses on helping to keep you well, rather than just providing coverage for covered illness or injury.

Your plan includes coverage for wellness services for women, men and children.

Your doctor will determine the tests that are right for you based on your age, gender and family history. Listed below are some services commonly provided as preventive care. Deductibles<sup>1</sup>, coinsurance<sup>2</sup> and/or copays may apply. Please see your coverage materials for details.

### WELLNESS EXAMS & IMMUNIZATIONS

	Birth to 2 Years	Ages 3 to 10	Ages 11 to 18	Ages 19 and older
Well-baby/Well-child/ Well-person exams	Birth, 1, 2, 4, 6, 9, 12, 15, 18, 24 & 30 months. Additional visit at 2-4 days for infants discharged less than 48 hours after delivery	Well child exams; once a year	Once a year	Periodic visits, depending on age
Diphtheria, tetanus toxoids, and acellular pertussis (DTaP)	2, 4 & 6 months and 15-18 months	Ages 4-6	Tetanus, diphtheria, acellular pertussis (Tdap) given once, ages 11-64	Tetanus and diphtheria toxoids booster (Td) every 10 years; Tdap given once, ages 11-64
Haemophilus influenzae type b conjugate (Hib)	2, 4 & 6 months and 12-15 months			
Hepatitis A (HepA)	12-23 months			May be required for persons at risk
Hepatitis B (HepB)	At birth, 1-4 months and 6-18 months	Ages 3-10 if not previously immunized	Ages 11-18 if not previously immunized	May be required for persons at risk
Human papillomavirus (HPV)		Girls ages 9-10, as doctor advises	Girls and women ages 11-12, catch up, ages 13-26	Catch-up, women through age 26
Influenza vaccine		Annually 6 months through 18 years		Ages 19-49, as doctor advises; ages 50 and older, annually
Measles, mumps, and rubella (MMR)	Ages 12-15 months	Ages 4-6 or 11 & 12 if not given earlier	If not already immune	Rubella for women of childbearing age if not immune
Meningococcal (MCV)			All persons ages 11-18	
Pneumococcal (Pneumonia)	2, 4 & 6 months and 12-15 months			Ages 65 & older, once (or younger than 65 for those with risk factors)
Poliovirus (IPV)	2 & 4 months and 6-18 months	Ages 4-6		
Rotavirus	Ages 6-24 weeks			
Varicella (chickenpox)	Ages 12-18 months	Ages 4-6	Second dose catch up or if no evidence of prior immunization or chickenpox	Second dose catch up or if no evidence of prior immunization or chickenpox
Zoster				Ages 60+

<sup>1</sup> Deductible – the amount you pay before the insurance starts to pay.

<sup>2</sup> Coinsurance – the portion of covered expenses you pay after you have met your deductible.

**SCREENINGS**

	<b>Birth to 2 Years</b>	<b>Ages 3 to 10</b>	<b>Ages 11 to 18</b>	<b>Ages 19 and older</b>
<b>Blood pressure</b>		At each visit	Once a year	Every 2 years or as doctor advises
<b>Cholesterol</b>		Screening of children and adolescents (after age 2, but by age 10) at risk due to known family history; when family history is unknown; or with personal risk factors (obesity, high blood pressure, diabetes)		Lipid profile, fasting or non-fasting, ages 20 and older, every 5 years
<b>Colon cancer</b>				The following tests will be covered for colorectal cancer screening, ages 50 and older (or at any age if risk factors) <ul style="list-style-type: none"> <li>• Fecal occult blood test (FOBT) or fecal immunochemical test (FIT) annually</li> <li>• Stool-based deoxyribonucleic acid (DNA) test</li> <li>• Flexible sigmoidoscopy every 5 years</li> <li>• Double-contrast barium enema (DCBE) every 5 years</li> <li>• Colonoscopy every 10 years</li> <li>• Computed tomographic colonography (CTC)/virtual colonoscopy every 5 years</li> </ul>
<b>Diabetes</b>				Ages 45 and older or at any age if asymptomatic with sustained BP greater than 135/80, every 3 years
<b>Fluoride</b>	Evaluate for sufficient fluoride in drinking water			
<b>Hearing</b>	All newborns by 1 month	4, 5, 6, 8 & 10 or as doctor advises	12, 15 & 18 or as doctor advises	65 & older or as doctor advises
<b>Hemoglobin or hematocrit</b>			Once a year for females after menarche	
<b>PSA</b>				Once a year for men ages 50 and older or any age with risk factors
<b>Size Measurements</b>	Weight, length & head circumference at each visit	Height & weight at each visit	Height & weight once a year	Height & weight periodically; include BMI
<b>Ultrasound AAA</b>				Men ages 65-75 who have ever smoked
<b>Vision</b>		3, 4, 5, 6, 8 & 10 or as doctor advises	12, 15 & 18 or as doctor advises	By Snellen chart ages 65 & older, as often as doctor advises

**WOMEN'S HEALTH**

<b>Chlamydia</b>	Sexually active women ages 24 and under
<b>Mammogram</b>	Women ages 40 and older, annually
<b>Osteoporosis</b>	Age 65 or older (or 60 for women at risk)
<b>Pap test</b>	Within 3 years of sexual activity; or ages 21-64, at least every 3 years

**Exclusions**

This document does not guarantee coverage for all preventive services. Immunizations for travel are generally not covered. Other non-covered services can include any medical service or device that is not medically necessary, and any services and supplies for or in connection with experimental, investigational or unproven services. This document contains only highlights of preventive health services. The specific terms of coverage, exclusions and limitations, including legislated coverage, is included in the Summary Plan Description or Insurance Certificate.

These preventive health services are based on recommendations from the Advisory Committee on Immunization Practices, U.S. Preventive Services Task Force, American Academy of Pediatrics, and other nationally recognized authorities. For additional information on immunizations, visit the immunization schedule section of [www.cdc.gov](http://www.cdc.gov). This document is a general guide. Always discuss your particular preventive care needs with your doctor.

"CIGNA," "CIGNA HealthCare" and the "Tree of Life" logo are registered service marks of CIGNA Intellectual Property, Inc., licensed for use by CIGNA Corporation and its operating subsidiaries. All products and services are provided exclusively by such operating subsidiaries and not by CIGNA Corporation. Such operating subsidiaries include Connecticut General Life Insurance Company, Tel-Drug, Inc. and its affiliates, CIGNA Behavioral Health, Inc., Intracorp, and HMO or service company subsidiaries of CIGNA Health Corporation and CIGNA Dental Health, Inc. In Arizona, HMO plans are offered by CIGNA HealthCare of Arizona, Inc. In California, HMO plans are offered by CIGNA HealthCare of California, Inc. and Great-West Healthcare of California, Inc. In Connecticut, HMO plans are offered by CIGNA HealthCare of Connecticut, Inc. In Virginia, HMO plans are offered by CIGNA HealthCare Mid-Atlantic, Inc. In North Carolina, HMO plans are offered by CIGNA HealthCare of North Carolina, Inc. All other medical plans in these states are insured or administered by Connecticut General Life Insurance Company.

