

Aetna Better Health®/Aetna Better Health® Kids

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AETNA BETTER HEALTH® OF PENNSYLVANIA AETNA BETTER HEALTH® KIDS

Routine Preventive Services Guidelines (Including Perinatal)	New vs Updated	Date of Quality Management/ Utilization Management Approval
Please refer to the following pages for a summary of recommended preventive health services/screenings for:	UPDATED MARCH 2020	03/19/2020

www.aetnabetterhealth.com/pennsylvania

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Preventive Health Guidelines

We adopt nationally accepted evidence-based preventive health guidelines (PHG) from the U.S. Preventive Services Task Force and the Centers for Disease Control and Prevention (CDC). Sometimes these sources may not provide enough evidence to recommend for or against a service. Or there may be conflicting interpretations of the evidence. When this happens, we may adopt recommendations from other nationally recognized sources.

Guidelines	Recognized Source
Immunization Schedules	CDC
Preventive screenings (including perinatal)	U.S. Preventive Services Task Force

The following links provide the guidelines and physician tools:

- Immunization schedules with resources for health care providers
- Routine preventive screening guidelines with information and tools for health professionals

We adopted the guidelines below for routine preventive health services and perinatal care. We did this to help improve health care. These guidelines aren't meant to direct coverage or benefits determinations or treatment decisions. For specific coverage information, members should refer to their member handbook or call us at the number on their plan member ID card.

Preventive Health Services for Children and Adolescents

This information is a summary of recommended preventive health services for healthy children and adolescents with normal risks.

Recommended Screening ¹	Timing
Obesity	Children and adolescents 6 years of age and older: Screen for obesity and offer or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.
Depression	Adolescents 12-18 years of age: Screen for major depressive disorder. Implement with adequate systems in place to ensure accurate diagnosis, effective treatment and appropriate follow-up.

¹ U.S. Preventive Services Task Force https://www.uspreventiveservicestaskforce.org/BrowseRec/Index/browse-recommendations Proprietary and Confidential Internal Use Only



Human Immunodeficiency Virus (HIV)	Adolescents 15 years of age and older. Younger adolescents who are at increased risk should also be screened. See Clinical Considerations section for more information about screening intervals.
Tobacco use prevention	School-age children and adolescents: Primary care physicians provide interventions, including education or brief counseling, to prevent start of tobacco use. See Clinical Considerations section for more information on effective interventions.
Vision	Children 3-5 years of age: Screen at least once to detect the presence of amblyopia or its risk factors. Current evidence is insufficient to assess the balance of benefits and harms of vision screening in children younger than 3 years.
Vaccinations	See the CDC website at https://www.cdc.gov/vaccines/schedules/index.html

Preventive Health Services for Adults

This information is a summary of recommended preventive health services for healthy adults with normal risks.

Men and Women	
Recommended screening ¹	Timing
Alcohol misuse	Screen for unhealthy alcohol use in primary care settings in adults 18 years or older, including pregnant women, and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce unhealthy alcohol use.
Colorectal cancer	Beginning at age 50 and continuing until 75 years of age: The risks and benefits of different screening methods vary. See the Clinical Considerations section and the Table for details about screening strategies.
Depression	Screen for depression in the general adult population, including pregnant and postpartum women. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.
High blood pressure	Adults 18 years of age and older: Obtain measurements outside of clinical setting for diagnostic confirmation before starting treatment. See the Clinical Considerations section for more information.
Hepatitis C (HCV)	Screen persons at high risk for infection. Adults born between 1945 and 1965: Offer one-time screening.
Human immunodeficiency virus (HIV)	Adults to age 65 years of age. Older adults who are at increased risk should also be screened. See Clinical Considerations section for more information about screening intervals.
Obesity	All adults: Offer or refer patients with a body mass index of 30 or higher (calculated as weight in kilograms divided by height in meters squared) to intensive, multi-component behavioral interventions.

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Tobacco use	All adults: Ask about tobacco use, advise to stop using tobacco and provide behavioral interventions and U.S. Food and Drug Administration (FDA)-approved pharmacotherapy for cessation to adults who use tobacco.
Vaccinations	See the CDC website at https://www.cdc.gov/vaccines/schedules/index.html+
Women Only	
Recommended screening ¹	Timing
Breast cancer	Women 50-74 years of age: biennial screening mammography
Cervical cancer	Women 21-29 years of age: screening with cervical cytology alone every 3 years
	 Women age 30-65 years of age: Screening every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone, or every 5 years with hrHPV testing in combination with cytology (cotesting)
	See the Clinical Considerations section for the relative benefits and harms of alternative screening strategies for women 21 years or older.
Chlamydia and gonorrhea	Sexually active women 24 years of age and younger and in older women who are at increased risk for infection
Folic Acid for the Prevention of Neural Tube Defects	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
Osteoporosis	Women 65 years of age and older; women younger than 65 years who are at increased risk of osteoporosis, as determined by a formal clinical risk assessment tool. See the Clinical Considerations section for information on risk assessment.
Intimate partner (domestic) violence	Women of childbearing age: Screen for intimate partner violence (IPV) and provide or refer women who screen positive to intervention services. See the Clinical Considerations or more information on effective ongoing support services for IPV and for information on IPV in men.

Perinatal Preventive Health Services

This information is a summary of recommended screenings and vaccinations for healthy pregnant women with normal risk.

Recommended screening ¹	Timing
Asymptomatic bacteriuria	Perform urine culture from 12-16 weeks gestation or first prenatal visit, if later
Breastfeeding counseling	During pregnancy and after birth: Interventions to support breastfeeding

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Depression	During pregnancy and post-partum: Ensure accurate diagnosis, effective treatment and appropriate follow-up. Provide or refer pregnant and postpartum persons who are at increased risk of perinatal depression to counseling interventions.
Gestational diabetes	Asymptomatic pregnant women after 24 weeks gestation
Hepatitis B virus (HBV)	First prenatal visit
Human immunodeficiency virus (HIV)	During pregnancy, including women who present in labor who haven't been tested and whose HIV status is unknown
Preeclampsia	Screen blood pressure measurements throughout pregnancy
Syphilis	Early screening for all pregnant women
Tobacco use	All pregnant women: Ask about tobacco use, advise them to stop using tobacco and provide behavioral interventions for cessation to pregnant women who use tobacco.
Vaccinations	See the CDC website at https://www.cdc.gov/vaccines/schedules/index.html

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