

# Preventive health guidelines

2023

## Take steps today for a healthier future

Your health plan 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, either:

- Check the Member Handbook.
- Call Member Services at the number on your member ID card.
- Visit [wellpoint.com/tn/medicaid](https://wellpoint.com/tn/medicaid).

### **Always get 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.

# Early and periodic screening, diagnosis, and treatment visits — birth to 2 years old

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

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

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.

A well-baby visit may include the following:

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

Screenings	When to receive them
Weight, length, and head measurement	At each visit.
BMI percentile*	At 24 months.
Newborn metabolic conditions, such as: <ul style="list-style-type: none"> <li>• Phenylketonuria (PKU), a blood test given to newborns one to three days after birth. PKU is when the body is unable to break down protein.</li> <li>• Sickle cell disease (SCD), an inherited blood disorder.</li> <li>• Thyroid screening.</li> </ul>	Birth to 2 months old (best checked at 3 to 5 days old) Bilirubin at birth (checks for newborn jaundice).
Critical congenital heart defect (birth defects of the heart)	At birth and at each visit.
Development of brain, body, and behavior	At each visit.
Hearing	As a newborn and as the doctor suggests.
Vision	At each visit.
Blood pressure	Check for risks at each visit.
Oral and dental health	Referral to a dentist, if needed — begin dental exams when teeth begin to appear in the mouth or no later than the first birthday, and then every six months thereafter. 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 old. Check for risks as the doctor suggests.
Lipid disorder (cholesterol problems)	Check for risks at 24 months.
Hepatitis B	Check for risks at each visit.
Autism (a condition that affects social skills and the way one communicates)	At 18 and 24 months.
Maternal postpartum depression (after a mother gives birth)	At 1, 2, 4, and 6 months.
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 identify where a child falls in relation to other children.

## Early and periodic screening, diagnosis, and treatment visits — 2 1/2 to 10 years old

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 behavioral health.
- Family and home living issues.
- The importance of minimizing exposure to UV radiation.

During the visit, your child may receive:

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

Screenings	When to receive them
Height, weight, BMI percentile*	At each visit.
Development — brain, body, and behavior	At each visit.
Anxiety	Each year beginning at age 8.
Vision	Each year.
Hearing	Each year.
Oral and dental health	Referral to a dentist, if needed. Dental exams each year. Fluoride varnish on the teeth when the dentist suggests (between 2 1/2 to 5 years old). Fluoride prescription based on your drinking water (between 2 1/2 to 10 years old).
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 identify where a child falls in relation to other children.

# Early and periodic screening, diagnosis, and treatment visits — 11 to 20 years old

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 behavioral health.
- **Safe sex**, especially reducing risks of sexually transmitted infections and diseases (STIs and STDs) and pregnancy.
- **Substance use**, whether that be 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.
- **Firearm safety**, if you own or are around guns.
- **Intimate partner violence.**
- **The importance of minimizing exposure to UV radiation.**

During the visit, the doctor may give:

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

Screenings	When to receive them
Height, weight, BMI*	Percentile to age 18, then BMI each year.
Development — mind, body, and behavior	Each year.
Depression	Each year beginning at age 12.
Blood pressure	Each year.
Vision	Each year.
Hearing	Screen with audiometry, once between ages 11–14, once between ages 15–17 and once between ages 18–21.
Oral and dental health	Each year. Fluoride prescription based on your drinking water (between ages 11–16).
Hemoglobin or hematocrit (blood count)	Check for risks each year.
Lipid disorder (cholesterol problems)	Once between ages 9–11. Once between ages 17–21. Risk assessment every other year.
STIs, including chlamydia and gonorrhea	Starting at age 11, if sexually active.
HIV	Screen once between ages 15–18 (check for risks each year). Persons who are at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP).
Syphilis	Screen in those at increased risk of infection.

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 79 years. Check for risks each year.
Hepatitis B	Check for risks each year. Screen if at an increased risk for 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 identify where a child falls in relation to other children.

## Wellness visits — adult women\*\*\*

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

- Diet and physical activity.
- Behavioral 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.
  - Checking for sexually transmitted infections and diseases (STIs and STDs), including HIV and hepatitis B (if at risk).
  - Folic acid supplements for those of childbearing age.
  - Intimate partner violence.
  - The importance of minimizing exposure to UV radiation.
  - The importance of exercise in adults over age 65 in preventing falls.

You may also receive vaccines and these screenings:

Screenings	When to receive them
Height, weight, BMI*	Each year or as your doctor suggests. Those 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. Re-check high readings at home.
BRCA gene risk assessment	As your doctor suggests for those 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 those aged $\geq 35$ years at an increased risk for breast cancer. Those who are at an increased risk for breast cancer and at a 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 from ages 40–65+ Consider screening every 2 years at age 50 unless instructed otherwise by your doctor.
Cardiovascular disease (CVD) risk assessment	As your doctor suggests from ages 40 to 75 years. Those 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 21–29, Pap test every three years.

	<p>For ages 30-65, either do a Pap test every three years or an HPV test alone, or a combination Pap test and HPV test every five years.</p> <p>Stop testing at age 65 if the last three Pap tests or last two co-tests (Pap plus HPV) within the last 10 years were normal. If there has been an abnormal Pap test within the past 20 years, talk with your doctor.</p>
Colorectal cancer (of the colon and rectum)	<p>From ages 40–75<sup>***</sup>, your doctor may suggest one or more of these test options:</p> <p>Stool (feces) tests:</p> <ul style="list-style-type: none"> <li>• Fecal immunochemical test (FIT)</li> <li>• FIT-DNA: stool and DNA combo test</li> <li>• Guaiac-based fecal occult blood test (gFOBT)</li> </ul> <p>Visual tests:</p> <ul style="list-style-type: none"> <li>• Colonoscopy (using a small camera on the end of a flexible tube to look at your entire colon)</li> <li>• CT colonography (using a CT scanner to take images of inside the colon)</li> <li>• 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)</li> </ul>

## Wellness visits — adult women continued

Screenings	When to receive them
Chlamydia and gonorrhea	If sexually active and ages 24 or younger. Age 25 and older if increased risk for infection.
Syphilis	Screen in those at increased risk of infection.
Hepatitis B	Screen if at an increased risk for infection.
HIV	As your doctor suggests between ages 19 to 60 years. Persons who are at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP).
Glucose (blood sugar) screening for type 2 diabetes	As your doctor suggests, from ages 35–70, 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 and 79 years.
Osteoporosis (checks how dense your bones are)	Testing should start no later than age 65. Those in menopause should talk to their doctor about osteoporosis and have the test if 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.

\*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.



\*\*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.

\*\*\* 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.<sup>1</sup>

# Pregnancy

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\*** (high blood pressure that causes other problems during pregnancy).
- **Hematocrit/hemoglobin** (blood count).
- **Rubella immunity** (to find out which persons 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 24–28 weeks.
- **Hepatitis B** screening recommended at first prenatal visit.
- **HIV** screening recommended in all pregnant persons whose HIV status is unknown, including those who present in labor or at delivery. Persons who are at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP).
- **Syphilis** screening recommended at first prenatal visit.
- **Urine** for asymptomatic bacteriuria, as your doctor suggests.

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).
- **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.

\*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.

## 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. Those who are pregnant should check with their doctor to make sure their vaccines are up to date.

You should NOT receive these vaccines while you are pregnant:

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

## Wellness visits — adult men\*\*

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

- Diet and physical activity.
- Behavioral 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.
- Checking for sexually transmitted infections and diseases (STIs and STDs), including HIV and hepatitis B (if high risk).
- Intimate partner violence.
- The importance of minimizing exposure to UV radiation.
- The importance of exercise in adults over age 65 in preventing falls.

You may also receive vaccines and these screenings:

Screenings	When to receive them
Height, weight, BMI*	Each year or as your doctor suggests. Those 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)	Once between 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. Those who are at increased risk should be offered a low- to moderate-dose statin (cholesterol medicine). Lipid screening may be required to assess risk.
Cholesterol	Statins (cholesterol medicine) may be needed for people ages 40–75 who have a higher risk of cardiovascular disease (such as heart disease).
Colorectal cancer (of the colon and rectum)	From ages 40–75**, your doctor may suggest one or more of these test options: Stool (feces) tests: <ul style="list-style-type: none"> <li>• Fecal immunochemical test (FIT)</li> <li>• FIT-DNA: stool and DNA combo test</li> <li>• Guaiac-based fecal occult blood test (gFOBT)</li> </ul> Visual tests: <ul style="list-style-type: none"> <li>• Colonoscopy (using a small camera on the end of a flexible tube to look at your entire colon)</li> </ul>

	<ul style="list-style-type: none"> <li>• CT colonography (using a CT scanner to take images of inside the colon)</li> <li>• 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)</li> </ul>
Glucose (blood sugar) screening for type 2 diabetes	As your doctor suggests, from ages 35–70, 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 and 79 years.
Hepatitis B	Screen if at an increased risk for infection.
HIV	As your doctor suggests between ages 19 to 60 years. Persons who are at high risk of HIV acquisition should be offered pre-exposure prophylaxis (PrEP).
Syphilis	Screen in those at increased risk of infection.
Prostate cancer	From ages 55–69, 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.

\*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.

\*\* 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.<sup>1</sup>

<sup>1</sup> 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

# Suggested vaccine schedule

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

Vaccines ↓   Ages →	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	11-12 years	13-18 years	19-64 years	65+ years	
<b>Hepatitis B</b>	✓	✓				✓							✓		
<b>Rotavirus (RV)</b>			2-dose or 3-dose series												
<b>Diphtheria, tetanus, pertussis (DTaP)</b>			✓	✓	✓			✓		✓					
<b>Tetanus, diphtheria, pertussis (Td/Tdap)</b>											Tdap		Every 10 years		
<b>Haemophilus influenzae type b (Hib)</b>			3-4 doses between 2-15 months with 1st dose at 2 months, last dose at 12-15 months												
<b>Pneumococcal conjugate (PCV13)</b>			✓	✓	✓		✓								
<b>Inactivated polio virus (IPV)</b>			✓	✓		✓				✓					
<b>Influenza (flu)</b>						Suggested each year from 6 months to 65+ years; 2 doses at least 4 weeks apart are recommended for children between 6 months to 8 years old having the vaccine for the first time									
<b>Measles, mumps, rubella (MMR)</b>							✓			✓					
<b>Varicella (chickenpox)</b>							✓			✓					
<b>Hepatitis A</b>						2-dose series between 12-23 months; taken 6-18 months apart									
<b>Human papillomavirus (HPV)</b>											2-dose series				
<b>Meningococcal</b>											✓	Booster at age 16; MenB-FHb at ages 16-23			
<b>Pneumococcal polysaccharide (PCV15, PCV20, PPSV23)</b>														✓	
<b>Zoster (HZ/su) recombinant vaccine</b>														2-dose series for ages 50+; 2-6 months apart	

\*For more information about updated HPV vaccines, see the Centers for Disease Control and Prevention website: *Use of a 2-Dose Schedule for Human Papillomavirus Vaccination — Updated Recommendations of the Advisory Committee on Immunization Practices* (December 16, 2016): [cdc.gov/mmwr/volumes/65/wr/mm6549a5.htm](https://www.cdc.gov/mmwr/volumes/65/wr/mm6549a5.htm).

**Hepatitis A (ages 2-18):** Minimum 6 months between the two doses. If you or your child has not had 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 aged 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](https://www.flu.gov) or [cdc.gov](https://www.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 (MMRV).

**Human papillomavirus (HPV):\*** Children who are 11-12 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 15-26) need three doses of HPV vaccine to protect against cancer-causing HPV infection. Adults ages 27-45 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 MenA,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 PCV or history is unknown recommended schedule based on vaccine received. 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 2-6 months apart, is recommended for adults 50 and older, including those who received the Zostavax (shingles) vaccine.



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**Spanish: Español**

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 833-731-2153 (TRS: 711).

**Kurdish: کوردی**

ئاگاداری: ئه گهر به زمانی کوردی قهسه ده کهیت، خزمه تگوزاریه کانی یارمه تی زمان، به خۆرایی، بو تو بهرده سته. په یوه ندی به  
833-731-2153 (TRS 711) بکه.

Do you need help with your healthcare, talking with us, or reading what we send you? Call us for free at: 833-731-2153 (TRS: 711).

We obey federal and state civil rights laws. We do not treat people in a different way because of their race, color, birth place, language, age, disability, religion, or sex. Do you think we did not help you or treated you differently? Then call 833-731-2153 (TRS 711) or TennCare 855-857-1673 (TRS 711) for free.