

# CEBT's Covered Preventative Services For Adult Men July 1, 2011



*Eligible charges for the items below will be covered at 100% through an in network provider. Through an out of network provider charges are subject to the plan deductible and coinsurance.*

<b>General Screening Guidelines</b>
<b>Alcohol Misuse</b> screening and counseling
<b>Abdominal Aortic Aneurysm</b> (one time screening) men aged 65 – 79 if ever smoked
<b>Aspirin</b> with prescription men aged 45 – 79
<b>Blood Pressure</b>
<b>Cholesterol Test</b> (lipid profile-total cholesterol, LDL cholesterol, HDL cholesterol and triglycerides)
<b>Colonoscopy</b> (or alternative colorectal cancer screening test) over age 50
<b>Depression</b> screening
<b>Diabetes Test</b> (blood sugar level check)
<b>Diabetes (Type 2)</b> screening for adults with high blood pressure
<b>Diet</b> counseling for adults at higher risk of chronic disease
<b>Digital Rectal Exam (DRE)</b>
<b>HIV</b> screening for adults at higher risks
<b>Immunization</b> vaccines for adults recommended
<b>Prostate Specific Antigen (PSA)</b>
<b>Obesity</b> screening and counseling
<b>Routine Vision</b> routine vision exam
<b>Sexually Transmitted Infection (STI)</b> prevention counseling
<b>Syphilis</b> screening for adults at higher risk
<b>Tobacco Use</b> screening and cessation interventions

<b>General Immunization / Vaccine</b>
<b>Hepatitis A</b>
<b>Hepatitis B</b>
<b>Influenza</b>
<b>Measles</b>
<b>Meningococcal</b>
<b>Mumps</b>
<b>Pneumococcal (pneumonia) Vaccine</b>
<b>Rubella</b>
<b>Tetanus / Diphtheria (Td) or Tetanus / Diphtheria / Pertussis (Tdap)</b>
<b>Varicella (chicken pox)</b>
<b>Zoster (shingles) age 60 and over</b>

*This list of benefits is intended only as a general description for the principal features of the benefit plans. Please refer to the Summary Plan Description.*

6/1/11