SafeGuard

Overview of SafeGuard Preventive Services

SafeGuard pays for 100% of certain preventive care services. These services have no out-of-pocket cost for you. Preventive services help you get and stay healthy and include particular screenings, immunizations, and checkups.



ADULTS

Adult screening tests:

- Abdominal aortic aneurysm
- Alcohol Misuse Screening & Behavioral Counseling Interventions
- Blood pressure
- Breast cancer counseling for genetic testing**
- Cervical cancer screening (Pap test and/or HPV)**
- Chlamydia and gonorrhea
- Cholesterol
- Colon cancer
- Depression

• Lung cancer

- Mammogram (breast cancer)**
- Osteoporosis
- Type 2 diabetes

Other services:

- Domestic and interpersonal violence screen and counseling**
- Immunizations, including flu shot
- Obesity screening
- Sexually transmitted infection (STI) counseling
- Tobacco cessation

PREGNANT WOMEN

Pregnancy-related screening tests:

- Bacteria in urine
- Gestational diabetes
- Hepatitis B
- Iron deficiency anemia
- Postpartum depression
- Urinary tract or other infection

Pregnancy-related services:

- Breastfeeding support, supplies and counseling
- Folic acid supplementation

INFANTS, CHILDREN, & TEENS

Routine services and screening tests:

- Developmental and behavioral
- Hearing/vision test
- Immunizations, including flu shot
- Newborn and infant screenings
- Well-baby/well-child care

Other services:

- Depression screening
- Lead exposure test
- Obesity screening
- Sexually transmitted infection (STI) screening and counseling
- Tobacco & alcohol use counseling

How to avoid extra costs! Questions to ask your doctor

When you schedule your appointment:

Ask: Is your practice in my plan's network*?

Say: I want preventive care screenings and tests that are 100% covered by my plan.

When you arrive at your appointment:

Ask your doctor:

- + Will any additional tests or treatments I get during my appointment not be considered preventive care?
- + Will talking about topics not considered preventive care during my appointment lead to out-of-pocket costs?
- + Can any routine lab work be sent to an in-network lab to lower any out-of-pocket costs?

Why preventive services are covered at 100%

- The Patient Protection and Affordable Care Act (PPACA) and the Health Care and Education Reconciliation Act of 2010 (HCERA) has designated these and other services as preventive benefits and available with no cost-sharing when provided by an in-network provider.
- These benefits are currently in effect unless otherwise noted.
- Check your Summary Plan Description for details on other preventive care benefits.
- This information is as a reference tool for your convenience and does not guarantee payment of any claims.

Services not covered at 100%

Below are examples of common services your doctor may perform that are not 100% covered preventive health services that may result in out-of-pocket expenses:

- Urine test
- Chest X-rays
- Hormone tests
- Thyroid tests
- Vitamin D tests
- EKGs (electrocardiograms)



^{*}Confirm in-network doctors and facilities by visiting ushealthandlife.com/find-a-provider/

^{··} Females only