



**The services listed below are covered with no member cost share and deductible does not apply:**

- Well-woman care prescribed by the Department of Consumer and Business Services by rule consistent with guidelines published by the United States Health Resources and Services Administration.
- Counseling for sexually transmitted infections, including but not limited to human immunodeficiency virus and acquired immune deficiency syndrome.
- Screening for:
  - Chlamydia
  - Gonorrhea
  - Hepatitis B
  - Hepatitis C
  - Human immunodeficiency virus and acquired immune deficiency syndrome
  - Human papillomavirus
  - Syphilis
  - Anemia
  - Urinary tract infection
  - Pregnancy
  - Rh incompatibility
  - Gestational diabetes
  - Osteoporosis
  - Breast cancer
  - Cervical cancer
- Screening to determine whether counseling related to the BRCA1 or BRCA2 genetic mutations are indicated and counseling related to the BRCA1 or BRCA2 genetic mutations if indicated.
- Screening and appropriate counseling or interventions for:
  - Tobacco use
  - Domestic and interpersonal violence
  - Folic acid supplements
  - Abortion
  - Breastfeeding comprehensive support, counseling, and supplies
  - Breast cancer chemoprevention counseling
- Any contraceptive drug, device or product approved by the United States Food and Drug Administration, according to state rule.
- Voluntary sterilization.
- As a single claim or combined with other claims for covered services provided on the same day:
  - Patient education and counseling on contraception and sterilization.
  - Services related to sterilization or the administration and monitoring of contraceptive drugs, devices and products, including but not limited to:
    - Management of side effects
    - Counseling for continued adherence to a prescribed regimen
    - Device insertion and removal
    - Provision of alternative contraceptive drugs, devices or products deemed medically appropriate in the judgment of the enrollee's provider.
- Any additional preventive services for women that must be covered without cost sharing under 42 U.S.C. 300gg-13, as identified by the United States Preventive Services Task Force or the Health Resources and Services Administration of the United States Department of Health and Human Services as of January 1, 2017.