Services listed below may be covered as preventive/wellness benefits when received from an in-network provider through your University of Idaho medical benefits between January 1, 2017 to December 31, 2017.

### 2017 Covered Preventive Care/Wellness Services

#### General Preventive Care Services
- Annual adult physical examinations; routine or scheduled
- Well-baby and well-child examinations
- Bone Density
- Chemistry Panels
- Cholesterol Screening
- Colorectal Cancer Screening (Colonoscopy, Sigmoidoscopy, Fecal Occult Blood Test)
- Complete Blood Count (CBC)
- Diabetes Screening
- Examinations for sports physicals
- GGT (liver function test)
- Pap Test
- PSA Test
- Rubella
- Screening EKG
- Screening Mammogram
- Thyroid Stimulating Hormone (TSH)
- Transmittable Diseases Screening (Chlamydia, Gonorrhea, HIV, Syphilis, TB)
- Urinalysis (UA)
- Uric acid
- Aortic Aneurysm Ultrasound
- Alcohol Misuse Assessment
- Genetic Counseling for High Risk Family History of Breast or Ovarian Cancer
- Newborn Metabolic Screening (PKU, Thyroxine, Sickle Cell)
- Health Risk Assessment for Depression
- Newborn Hearing Test
- Lipid Disorder Screening
- Smoking Cessation Counseling Visit
- Dietary Counseling (limited to 3 visits per insured, per benefit period)

#### Hearing Examinations
- One routine wellness hearing examination by a qualified medical provider per participation per benefit period

#### Maternity Benefits (for pregnant women)
- Urine Culture
- Hepatitis B Virus Screening
- Iron Deficiency Screening
- Rh (D) Incompatibility Screening

#### Women’s Preventive Care Services
- Breast-feeding support, supplies, and counseling
- Contraception methods and counseling
- Domestic violence screening
- Gestational Diabetes screening
- HIV screening and counseling
- Human papillomavirus testing (beginning at age 30, and every three years after)
- Sexually transmitted infections counseling
- Well-women visits

#### Immunizations and Travel Vaccines
- Accellular Pertussis
- Cholera
- Diphtheria
- Hemophilius Influenza B
- Hepatitis A
- Hepatitis B
- Human papillomavirus (HPV)
- H1N1
- Influenza
- Japanese Encephalitis
- Measles
- Meningococal
- Mumps
- Plague
- Pneumococcal (pneumonia)
- Poliomyelitis (polio)
- Rotavirus
- Rubella
- Tetanus
- Typhoid
- Typhim Vi
- Typhus
- Varicella (Chicken Pox)
- Yellow Fever
- Zoster

Routine immunizations included in the State of Idaho Vaccine for Children Program, as amended or revised.

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Every effort has been made to make certain that the information in this communication is accurate. However, this communication is only intended to give you an overview of your preventive/wellness benefits and does not contain all the details about the benefits provided, exclusions, and other terms and conditions of the plans. Your benefits are determined according to the official SPD. If the information in this communication differs from the SPD, the SPD will govern in all cases. The University may amend or terminate these plans or any benefits provided by these plans at any time.

Neither this communication nor any of the University’s policies for benefit plans should be considered a contract for purposes of employment or payment of compensation of benefits.