



Adult Preventive Healthcare Information for Members

This is a list of preventive tests and shots. They can help you avoid disease and illness. You can help improve your health by following this schedule.

Frequency of Physical Examination

Please visit your doctor on a regular basis. Get an initial exam in your first 90 days as a member. If you are pregnant, get your first exam in your first 14 days as a member. Recommendations for periodic health exam visits for asymptomatic adults are as follows:

- **Ages 18 to 39 years:** Exam frequency: every 1 to 3 years (annual Pap smears are indicated for females unless 3 consecutive normal smears, allowing pap smears every 3 years)
- **Ages 40 to 64 years:** Exam frequency: every 1 to 2 years based on risk factors
- **Ages 65 and Over:** Exam frequency: every year

Age	Screening	Frequency
<ul style="list-style-type: none"> • 18 and older 	Blood Pressure, Height, Body Mass Index (BMI), Alcohol Use	Annually, 18-21 years After 21, every 1-2 years or per PCP recommendations
<ul style="list-style-type: none"> • Male > 35 years or female > 45 years of age or any adults age 20 or older at high risk 	Cholesterol	Every 5 years (More frequent if elevated)
<ul style="list-style-type: none"> • Male 35 – 65 years • Female 45 - 65 years 	Cholesterol	Every 5 years (More frequent if elevated)
<ul style="list-style-type: none"> • Female 18 years of age and older who are sexually active or pregnant (consider at age 12 if sexually active) 	Pap Smear and Chlamydia	Every 1-3 Years or per PCP's recommendations
<ul style="list-style-type: none"> • Female 40 years and older 	Mammography	Every 1-2 years
<ul style="list-style-type: none"> • 50 years and older 	Colorectal Screening	Periodically depending upon test
<ul style="list-style-type: none"> • 50 years and older 	Hearing Screening	Periodically
<ul style="list-style-type: none"> • Female ≥ 65 years old, or ≥ 60 years at risk 	Osteoporosis (Bone Mass Measurement)	Every two years or per PCP's recommendations
<ul style="list-style-type: none"> • 65 years and older, or younger for those that have diabetes or other risk factors 	Vision including a Glaucoma or Diabetic Retinal exam as needed	Every two years for routine exams or Annual if Diabetic or other risk factors

Immunization* (see attached schedule)	
• Tetanus-Diphtheria and acellular pertussis (Td/Tdap)	18 years and older, Tdap: Substitute 1-time dose of Tdap for Td then boost with Td every 10 years
• Varicella (VZV)	All adults without evidence of immunity to varicella should receive 2 doses of single-antigen varicella vaccine if not previously vaccinated or the second dose if they have received only 1 dose
• Measles, Mumps, Rubella (MMR)	Adults born during or after 1957 should receive 1-2 doses
• Pneumococcal polysaccharide (PPSV)	65 years of age and older, all adults who smoke or have certain chronic medical conditions – 1 dose may, need a 2 nd dose if identified at risk
• Seasonal Influenza	All adults annually
• Hepatitis A Vaccine (HepA)	All unvaccinated individual who anticipate close contact with an international adoptee or those with certain high-risk behaviors
• Hepatitis B vaccine (HepB)	Adults at risk, 18 years of age and older – 3 doses
• Meningococcal conjugate vaccine (MCV)	College freshmen living in dormitories not previously vaccinated with MCV and others at risk, 18 years of age and older – 1 dose Meningococcal polysaccharide vaccine) is preferred for adults aged <u>≥</u> 56 years
• Human Papillomavirus (HPV)**	* For eligible members through 26 years of age (three dose series)
• Zoster	Age 60 and older 1 dose
• Haemophilus Influenza type b (Hib)	For eligible members who are at high-risk and who have not previously received Hib vaccine (1 dose)

Prevention

- Discuss aspirin to prevent cardiovascular events
 - Men – 40 years and older periodically
 - Women – 50 years and older periodically
- Discuss the importance of preventive exams (Mammograms and Breast self-examination for women at high risk and who have family history)
- Discuss prostate-specific antigen (PSA) test and rectal exam for men after 40 years old per PCP discretion

Counseling

- Calcium intake: 1,000mg/day (women age 18-50 years old), 1200-1500 mg/day (women >50 years)
- Folic Acid: 0.4 mg/day (women of childbearing age) ; women who have had children with Neural Tube Defects (NTD) should take 4 mg/day
- Breastfeeding: Women after childbirth
- Tobacco cessation, drug and alcohol use, STD's and HIV, nutrition, physical activity, sun exposure, oral health, and injury prevention
- Medication List
- Advance Directives

* Unless there is a medical reason not to get a specific vaccine

**Subject to individual state coverage

Recommended adult immunization schedule, by vaccine and age group United States 2011

VACCINE ▼	AGE GROUP ►	19–26 years	27–49 years	50–59 years	60–64 years	≥65 years
Influenza ^{1,*}		1 dose annually				
Tetanus, diphtheria, pertussis (Td/Tdap) ^{2,*}		Substitute 1-time dose of Tdap for Td booster; then boost with Td every 10 years				Td booster every 10 years
Varicella ^{3,*}		2 doses				
Human papillomavirus (HPV) ^{4,*}		3 doses (females)				
Zoster ⁵					1 dose	
Measles, mumps, rubella (MMR) ^{6,*}		1 or 2 doses		1 dose		
Pneumococcal (polysaccharide) ^{7,8}		1 or 2 doses				1 dose
Meningococcal ^{9,*}		1 or more doses				
Hepatitis A ^{10,*}		2 doses				
Hepatitis B ^{11,*}		3 doses				

* Covered by the Vaccine Injury Compensation Program



For all persons in this category who meet the age requirements and who lack evidence of immunity (e.g., lack documentation of vaccination or have no evidence of previous infection)



Recommended if some other risk factor is present (e.g., based on medical, occupational, lifestyle, or other indications)



No recommendation

Vaccines that might be indicated for adults, based on medical and other indications - United States, 2011

INDICATION▶	Pregnancy	Immunocompromising conditions (excluding human immunodeficiency virus [HIV]) ^{3,5,6,13}	HIV infection ^{3A,12,13} CD4+ T lymphocyte count		Diabetes, heart disease, chronic lung disease, chronic alcoholism	Asplenia ¹² (including elective splenectomy) and persistent complement component deficiencies	Chronic liver disease	Kidney failure, end-stage renal disease, receipt of hemodialysis	Health-care personnel
			<200 cells/ μ L	\geq 200 cells/ μ L					
Influenza ^{1,*}									1 dose TIV annually
Tetanus, diphtheria, pertussis (Td/Tdap) ^{2,*}	Td								Substitute 1-time dose of Tdap for Td booster; then boost with Td every 10 years
Varicella ^{3,*}		Contraindicated							2 doses
Human papillomavirus (HPV) ^{4,*}									3 doses through age 26 years
Zoster ⁵		Contraindicated							1 dose
Measles, mumps, rubella ^{6,*}		Contraindicated							1 or 2 doses
Pneumococcal (polysaccharide) ^{7,8}									1 or 2 doses
Meningococcal ^{9,*}									1 or more doses
Hepatitis A ^{10,*}									2 doses
Hepatitis B ^{11,*}									3 doses

* Covered by the Vaccine Injury Compensation Program

 For all persons in this category who meet the age requirements and who lack evidence of immunity (e.g., lack documentation of vaccination or have no evidence of previous infection)

 Recommended if some other risk factor is present (e.g., on the basis of medical, occupational, lifestyle, or other indications)

 No recommendation

References

Centers for Disease Control and Prevention. Recommended adult immunization schedule---United States, 2011. *MMWR* 2011;60(4). The recommended adult immunization schedule has been approved by the Advisory Committee on Immunization Practices, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Physicians.

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