

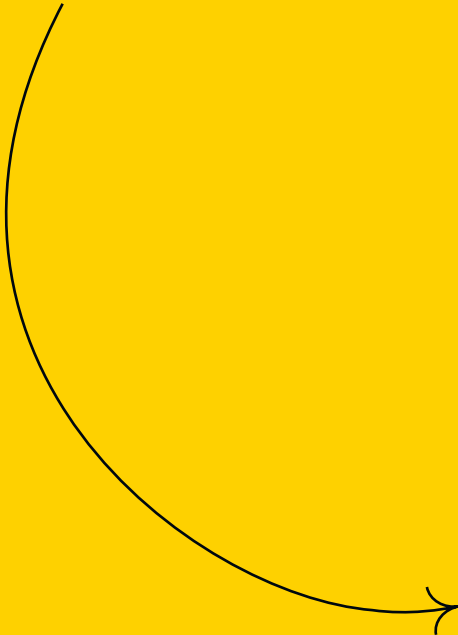


2025

Preventive Health Care Guidelines

Guidelines may change throughout the year based on new research and recommendations.

TABLE OF CONTENTS



All adults	6
Women	11
Pregnant women	14
Children	19

2025 FREE OR LOW-COST PREVENTIVE HEALTH CARE SERVICES

At MetroPlusHealth, we always want you to be at your best. That’s why we encourage you and your family to take advantage of preventive care services available to you at low or no cost. We’ve listed dozens of FREE preventive services here for adults, women and children that just may help you be your healthiest yet.

What are preventive health care services?

Preventive care helps your doctor find potential health problems before you feel sick. By finding medical problems early, your doctor can see that you get the care you need to stay healthy. Be sure to visit your doctor regularly to get preventive care.

Preventive care includes some:

- ✓ Immunizations
- ✓ Physical exams
- ✓ Lab tests
- ✓ Screenings

Here is an example: You schedule your annual preventive checkup with your doctor. While you’re there, the doctor does a routine exam, several preventive screenings and gives you a flu shot. We pay for all these services in full, and your portion of the cost is \$0.

The free preventive care services we list are based on recommendations from the U.S. Preventive Services Task Force (USPSTF), the Advisory Committee on Immunization Practices (ACIP) of the Center for Disease Control and Prevention (CDC), Health Resources and Services Administration (HRSA) of the U.S Department of Health and Human Services and the latest medical research from organizations like the American Medical Association.

Do you know the difference between preventive and diagnostic services?

The same service could be preventive (free) or diagnostic (copayments, coinsurance or deductibles apply).

- ✓ A list of free preventive care services can be found in this online guide at marketplustcc.metroplus.org.
- ✓ Preventive care services are free when provided by an in-network doctor. Go to metroplus.org/find-doctor and use our Find a Doctor tool to find in-network doctors.

	Reason for service	What you'll pay
Preventive care	To prevent health problems. You don't have symptoms.	You won't pay anything.
Diagnostic care	You have a symptom, or you're being checked because of a known health issue.	This is a medical claim. Your deductible, copayments and coinsurance may apply.



6 in 10 Americans have at least one chronic disease, and 4 in 10 have two or more chronic diseases such as heart disease and diabetes. Did you know many of these deaths can be prevented through early detection and the right care?

Source: CDC

Questions about preventive care?

Call Member Services at the number on the back of your member ID card.

How do I know if a service is preventive or diagnostic?

A service is diagnostic when it's done to monitor, diagnose or treat health problems. That means:

- ✓ If you have a chronic disease like diabetes, your doctor may monitor your condition with tests. Because the tests manage your condition, they're diagnostic.
- ✓ If you have a preventive screening and a health problem shows up, your doctor may order follow-up tests. In this case, the follow-up tests are diagnostic.
- ✓ If your doctor orders tests based on symptoms you're having, like a stomach ache, these tests are diagnostic.

If you receive services listed in this guide for a diagnostic reason, there may be a cost to you.

Compare costs and quality for diagnostic services

Did you know that the cost of medical tests and procedures can vary 300% or more depending on where you have these performed. Compare costs and quality for 200+ health services at marketplustcc.metroplus.org.



Service	It's preventive (free) when...	It's diagnostic when...
Diabetes screening	A blood glucose test is used to detect problems with your blood sugar, even though you don't have symptoms.	You're diagnosed with diabetes and your doctor checks your A1c.
Osteoporosis screening	Your doctor recommends a bone density test based on your age or family history.	You've had a health problem, or your doctor wants to determine the success of a treatment.
Colon cancer screening	Your doctor wants to screen for signs of colon cancer based on your age or family history. Related services integral to a colonoscopy are covered under the preventive care services benefit including: pre-operative examination, the associated facility, anesthesia, polyp removal (if necessary), pathologist and physician fees.	You are having a health problem like bleeding or irregularity, or a post-operative examination.
Breast cancer screening	Your doctor wants to screen for breast cancer before there are signs or symptoms of the disease.	You are experiencing some symptoms like a lump, pain, nipple discharge, or changes in breast size or shape.
Cholesterol screening	To identify high cholesterol levels before they lead to heart disease or other health problems.	More frequent testing may be needed with a known history of heart disease, high cholesterol, or other risk factors for cardiovascular disease.
Metabolic panels	Newborns 0–90 days.	Primarily diagnostic.
Prostate blood test	Never preventive.	Always diagnostic. The U.S. Preventive Services Task Force (USPSTF) recommends that men ages 55 to 69 years discuss the possible benefits and harms of prostate-specific antigen (PSA) screening with their health care provider and make an individualized decision about whether to get screened.

2025 FREE PREVENTIVE HEALTH CARE SERVICES

GENERAL ADULT HEALTH

Care for all adults

You can keep track of services by completing the “Date Received” column.

Routine checkup

Age	Recommendation	Date received
19–49 years	Once every 1–2 years; annually if desired	
50 and older	Once a year	

Immunizations

Doses, ages and recommendations vary. [Click here](#) to go to the 2025 Recommended Adult Immunization Schedule for ages 19 years or older

Vaccine	Recommendation	Date received
Chickenpox (varicella)	2 doses (if born in 1980 or later) 4–8 weeks apart for those who did not receive the vaccine.	
COVID-19	For the latest COVID-19 vaccination recommendations please visit: cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf	
Flu (influenza)	1 dose annually.	
Haemophilus Influenza type b (Hib)	1 or 3 doses depending on indication.	
Hepatitis A	2, 3, or 4 doses depending on vaccine. Any person not fully vaccinated and who is at risk: 2 or 3 dose series. Risk factors may include chronic liver disease, HIV infection, men who have sex with men, homelessness.	
Hepatitis B	Ages 19–59: 2, 3 or 4 dose series. Ages 60 and older with or without known risk factors (e.g., chronic liver disease, HIV, sexual exposure risk) should complete a HepB vaccine series.	

Immunizations (continued)

Doses, ages and recommendations vary. [Click here](#) to go to the 2025 Recommended Adult Immunization Schedule for ages 19 years or older.

Vaccine	Recommendation	Date received
HPV (human papillomavirus)	Recommended for all persons through age 26: 2 or 3 dose series. 27–45 years 2 or 3 dose series as per doctor's advice.	
Measles, mumps, rubella (MMR)	1–2 doses if no history of the vaccination or disease (if born in 1957 or later).	
Meningitis/ Meningococcal (MenACWY)	1 or 2 doses as per doctor's advice. For those at risk (e.g., HIV infection, asplenia): 2 dose series at least 8 weeks apart.	
Meningitis B (MenB)	2 or 3 doses depending on vaccine and recommendation.	
Mpox	Any person at risk for Mpox infection: 2-dose series, 28 days apart.	
Pneumonia/ Pneumococcal (PCV15, PCV20, PCV21, PPSV23)	Age 50 years or older who have: - Not previously received a dose of PCV13, PCV15, PCV20, or PCV21 or whose previous vaccination history is unknown: 1 dose PCV15 or 1 dose PCV20 or 1 dose PCV21 Age 19–49 years with risk factors who have: - Not previously received a PCV13, PCV15, PCV20, or PCV21 or whose previous vaccination history is unknown: 1 dose PCV15 or 1 dose PCV20 or 1 dose PCV21	
Poliovirus	Adults known or suspected to be unvaccinated or incompletely vaccinated: administer remaining doses (1, 2, or 3 IPV doses) to complete a 3-dose primary series. Unless there are specific reasons to believe they were not vaccinated, most adults who were born and raised in the United States can assume they were vaccinated against polio as children.	
Respiratory Syncytial Virus (RSV)	- Pregnant at 32 weeks 0 days through 36 weeks and 6 days gestation from September through January in most of the continental United States: 1 dose. 60-74 years: Unvaccinated and at increased risk of severe RSV: 1 dose - Age 75 years or older: Unvaccinated: 1 dose	
Shingles/Herpes Zoster (RZV)	≥50: 2 doses over 2–6 months apart.	
Tetanus, diphtheria and whooping cough (pertussis)	1 dose Tdap, then Td, or Tdap every 10 years. Pregnancy: 1 dose Tdap during each pregnancy.	

Doctor visits and tests

Assessments, screenings and counseling	Recommendation	Date received
Abdominal aortic aneurysm screening	Once for men ages 65–75 with a history of smoking.	
Anxiety disorders screening	Adults 64 years or younger, including pregnant and postpartum persons.	
Cholesterol test	Most healthy adults should have their cholesterol checked every 4–6 years. Those who have heart disease or diabetes or a family history of high cholesterol should have their cholesterol checked more often.	
Colon cancer screening	Age 45–75 years of age: Stool test every year. Colonoscopy every 10 years is highly recommended.	
Depression screening and suicide risk	Every year, during physical exam in the adult population, including pregnant and postpartum persons, as well as older adults. (65 years or older)	
Falls prevention	Exercise interventions to prevent falls in community dwelling adults age 65 years or older who are at increased risk for falls.	
Healthy diet and physical activity for cardiovascular disease prevention in adults with cardiovascular risk factors	At your doctor's discretion if you're at high risk for heart and diet related chronic diseases. Behavioral counseling interventions in adults with cardiovascular disease risk factors to promote a healthy diet and physical activity.	
Hepatitis B screening	Adolescents and adults at increased risk for infection.	
Hepatitis C screening	Adults 18–79 years.	
High Blood Pressure Screening in Adults	All adults: Every preventive care wellness visit.	
HIV prevention in adolescents and adults at increased risk of HIV	Preexposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of getting HIV.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
HIV screening	Adolescents and adults aged 15–65 years. Younger adolescents and older adults who are at increased risk should also be screened.	
Intimate partner violence, elder abuse, and abuse of vulnerable adults	Screen for intimate partner violence (IPV) in women of reproductive age and provide or refer women who screen positive to ongoing support services.	
Lung cancer screening	Get screened if all of the following apply: • You're age 50 to 80 • You have a 20 pack-year smoking history • You smoke now or you quit within the last 15 years	
Prediabetes and Type 2 diabetes screening	Adults 35 and older and adults aged 18–34 with BMI ≥ 25 screen every 3 years.	
Sexually transmitted infections: behavioral counseling	Behavioral counseling for all sexually active adolescents and for adults who are at increased risk for STIs.	
Statin preventive medication (For statin medication benefits, check your pharmacy plan benefits)	Statins are medicines that reduce the risk of heart attack and stroke by helping to lower the amount of cholesterol and other fats in the blood. Experts recommend that you take a statin if all 3 of these statements are true: • You're age 40 to 75 • You have 1 or more cardiovascular disease risk factors such as high cholesterol, diabetes, high blood pressure, or you smoke • Your doctor has decided that you are at high risk for heart attack and stroke	
Syphilis infection screening in non-pregnant adolescents and adults	Screening for syphilis infection in persons who are at increased risk for infection.	
Substance use disorder screening	Unhealthy drug use screening: 18 years or older. Screening should be implemented when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
Tobacco smoking cessation	At each visit ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA) — approved pharmacotherapy for cessation to non-pregnant adults who use tobacco.	
Tuberculosis (TB) testing	Asymptomatic adults at increased risk for infection.	
Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions	18 years or older at physical exam, including pregnant women.	
Weight loss to prevent obesity related morbidity and mortality in adults	Clinicians should offer or refer adults with a body mass index (BMI) of 30 or higher to intensive, multicomponent behavioral interventions.	

Drugs

Prescription required.

Prescription	Recommendation	Date received
Tobacco cessation products	FDA-approved tobacco/vaping cessation prescription medication and OTC nicotine replacement (NRT). For MetroPlus Gold, this is only covered with a prescription rider. For Medicare, OTC products are not covered under Medicare Part D Law. For prescription products, copayments may apply. For Medicaid Members, pharmacy coverage is provided by NYRx, the New York State Medicaid Pharmacy program.	

2025 FREE PREVENTIVE HEALTH CARE SERVICES

WOMEN'S HEALTH

Care that's recommended for women

You can keep track of the services you've had by completing the "Date Received" column. See the "Adult Health" section for more care that's recommended for all adults.

Doctor visits and tests

Assessments, screenings and counseling	Recommendation	Date received
BRCA risk assessment and genetic counseling/testing	Assess women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or an ancestry associated with breast cancer susceptibility 1 and 2 (BRCA1/2) gene mutations. Women with a positive result on the risk assessment tool should receive genetic counseling and, if indicated after counseling, genetic testing.	
Breast cancer screening (mammogram)	Once every 2 years for women ages 40–74.	
Cervical cancer screening	Ages 21 to 29: Pap smear every 3 years. Ages 30 to 65: • Get screened every 3 years with a Pap smear alone • Get screened every 5 years with high risk human papillomavirus (hrHPV) testing alone, or • Every 5 years with hrHPV testing in combination with a Pap smear (cotesting)	
Chlamydia and gonorrhea infection screening including pregnant women	If you're age 25 or younger and having sex, get tested once every year. If you're age 25 or older, get tested every year if you're at increased risk for infection for example you have more than 1 sex partner, a new sex partner, or a sex partner with an STI.	
Contraceptive counseling and contraception methods	Routine counseling to address contraceptive needs, expectations, and concerns. FDA-approved contraceptive methods, sterilization procedures, education and counseling as prescribed by a health care provider for women with reproductive capacity.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
HIV prevention	Preexposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of getting HIV.	
Osteoporosis screening (bone density testing)	Women 65 and older, and postmenopausal women younger than 65 years who are at increased risk of osteoporosis.	
Urinary incontinence screening	Yearly.	
Well-woman visits (physical exams)	Annually.	

Drugs

Prescription required.

Prescription	Recommendation	Date received
Breast cancer prevention medication	Risk-reducing medications for women aged 35 years or older with an increased risk of breast cancer and at low risk for adverse medication effects. For Medicaid Members, pharmacy coverage is provided by NYRx, the New York State Medicaid Pharmacy program.	
Folic acid supplements	Everyone who can get pregnant or who is pregnant: take a daily supplement containing 0.4-0.8 mg of folic acid. For Medicare, OTC products are not covered under Medicare Part D Law. For prescription products, copayments may apply. For Medicaid Members, pharmacy coverage is provided by NYRx, the New York State Medicaid Pharmacy program.	

Contraceptives

Prescription required.

Type	Method	Benefit level
Hormonal	• Oral contraceptives • Injectable contraceptives • Patch • Ring	Your deductible and/or prescription copayment applies for brand name contraceptives when there is a generic available. For Medicare, OTC products are not covered under Medicare Part D Law. For prescription products, copayments may apply. For Medicaid Members, pharmacy coverage is provided by NYRx, the New York State Medicaid Pharmacy program.
Barrier	• Diaphragms • Condoms • Contraceptive sponge • Cervical cap • Spermicide	
Implantable	• IUDs • Implantable rod	
Emergency	• Ella® • New Day™ • My Way™	Covered. For Medicare, OTC products are not covered under Medicare Part D Law. For prescription products, copayments may apply. For Medicaid Members, pharmacy coverage is provided by NYRx, the New York State Medicaid Pharmacy program.
Permanent	Tubal ligation	Covered at outpatient facilities and if received during an inpatient stay.

2025 FREE PREVENTIVE HEALTH CARE SERVICES

PREGNANT WOMEN'S HEALTH

Care that's recommended for pregnant women

If you're pregnant, plan to become pregnant or recently had a baby, we recommend the preventive care that's listed here. You can keep track of the services you've had by completing the "Date Received" column.

See the "Adult Health" section for more care that's recommended for all adults including pregnant and postpartum persons.

Doctor visits and tests

Assessments, screenings and counseling	Recommendation	Date received
Aspirin use to prevent preeclampsia and related morbidity and mortality	Use of low-dose aspirin (81 mg/day) as preventive medication after 12 weeks of gestation in persons who are at high risk for preeclampsia.	
Bacteriuria screening with urine culture	Pregnant persons without signs and symptoms of a urinary tract infection.	
Breastfeeding support and counseling	Primary care clinicians can support women before and after childbirth by providing interventions to support breastfeeding.	
Gestational diabetes screening	Screening in asymptomatic pregnant persons at 24 weeks of pregnancy or after.	
Screening for diabetes mellitus after pregnancy	Screen for type 2 diabetes in women with a history of gestational diabetes mellitus (GDM) who are not currently pregnant and who have not previously been diagnosed with type 2 diabetes. Initial testing should ideally occur within the first year postpartum and can be conducted as early as 4–6 weeks postpartum. Women with a negative initial postpartum screening test result should be re-screened at least every 3 years for a minimum of 10 years after pregnancy.	
Hepatitis B screening	During the first prenatal visit.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
Healthy weight and weight gain in pregnancy	Clinicians should offer pregnant persons effective behavioral counseling interventions to promote healthy weight gain and to prevent excessive gestational weight gain in pregnancy.	
HIV screening	All pregnant persons during each pregnancy including those who present in labor or at delivery whose HIV status is unknown.	
Hypertensive disorders in pregnancy	Screen for hypertensive disorders in pregnant persons with blood pressure measurements throughout pregnancy.	
Perinatal depression	Clinicians should provide or refer pregnant and postpartum persons who are at increased risk of perinatal depression to counseling interventions.	
Prenatal care	Prenatal checkups: During pregnancy, regular checkups are very important. This consistent care can help mom and baby keep healthy, spot problems if they occur, and prevent problems during delivery. Typically, routine checkups occur: • Once each month for weeks 4 through 28 • Twice a month for weeks 28 through 36 • Weekly for weeks 36 to birth • Women with high-risk pregnancies need to see their doctors more often	
Rh incompatibility screening	Rh(D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care. Repeated Rh(D) antibody testing for all unsensitized Rh(D)-negative women at 24 to 28 weeks' gestation, unless the biological father is known to be Rh(D)-negative.	
Syphilis infection screening in pregnant women	Early screening for syphilis infection in all pregnant women.	
Tobacco smoking cessation in pregnant women	Ask all pregnant persons about tobacco use, advise them to stop using tobacco, and provide behavioral interventions for cessation to pregnant persons who use tobacco.	

Immunizations

Doses, ages and recommendations vary.

Vaccine	Before pregnancy	During pregnancy	After pregnancy	Date received
Chickenpox (varicella)	Yes; avoid getting pregnant for 4 weeks.	No	Yes, immediately postpartum.	
COVID-19 vaccine	Yes	Yes	Yes	
Hepatitis A	Yes	Yes, if at risk.	Yes, if at risk.	
Hepatitis B	Yes	Yes, if not already vaccinated. Note: PreHevbrio is not recommended in pregnancy due to lack of safety data in pregnant women.	Yes, if at risk.	
HPV (human papillomavirus)	Recommended for all persons through age 26 years.	No	Recommended for all persons through age 26 years.	
Flu nasal spray	The nasal spray flu vaccine is approved for use in healthy non-pregnant people, 2 through 49 years old. People with certain medical conditions should not get the nasal spray flu vaccine.	No	The nasal spray flu vaccine is approved for use in healthy non-pregnant people, 2 through 49 years old. People with certain medical conditions should not get the nasal spray flu vaccine.	
Flu shot	Yes	Yes	Yes	
Measles, mumps, rubella (MMR)	Yes; avoid getting pregnant for 4 weeks.	No	Vaccinate after pregnancy.	

Immunizations (continued)

Doses, ages and recommendations vary.

Vaccine	Before pregnancy	During pregnancy	After pregnancy	Date received
Meningococcal	If indicated.	Delay MenB until after pregnancy due to lack of safety data in pregnant women. May administer if at increased risk and vaccination benefits outweigh potential risks.	If indicated.	
Mpox	If indicated.	There is currently no recommendation for Jynneos (Mpox vaccine) use in pregnancy due to lack of safety data in pregnant women. If high risk exposures cannot be avoided women who are pregnant may receive Jynneos in consultation with their health care provider and after careful consideration of the risks and benefits.	If indicated.	
Pneumococcal	If indicated.	No recommendation for PCV or PPSV23 due to limited data.	If indicated.	

Immunizations (continued)

Doses, ages and recommendations vary.

Vaccine	Before pregnancy	During pregnancy	After pregnancy	Date received
Respiratory syncytial virus (RSV)	N/A	A single dose of RSV vaccine during weeks 32 through 36 of pregnancy sometime between September through January (RSV season) so that babies are protected against severe RSV disease at birth.	Adults 60 years of age and older have the option to receive a single dose of RSV vaccine, based on discussions between the patient and their health care provider.	
Tetanus, diphtheria and pertussis	Yes (1 dose Tdap, then Td, or Tdap booster every 10 years).	1 dose Tdap during each pregnancy, preferably in early part of gestational weeks 27–36.	Yes (1 dose Tdap, then Td, or Tdap booster every 10 years).	
Zoster (RZV)	≥50: 2 doses over 2–6 months apart.	There is no recommendation for RZV use in pregnancy.	Consider delaying RZV after pregnancy.	

2025 FREE PREVENTIVE HEALTH CARE SERVICES CHILDREN'S HEALTH

Care for newborns through age 18

You can keep track of services by completing the "Date Received" column. More than one child?
[Click here](#) for additional copies.

Well child visits

Babies need to see the doctor or nurse 6 times before their first birthday. First well-baby visit is 3–5 days after coming home from the hospital. After that first visit the schedule for well child visits are as follows:

Age	Recommendation	Date received
Newborn	1 visit 3–5 days after discharge	
0–2 years old	1 visit at 1, 2, 4, 6, 9, 12, 15, 18 and 24 months	
2 1/2 years old (30 months)	1 visit at 30 months	
3–21 years old	1 visit every year	

Immunizations

Doses, ages and recommendations vary. [Click here](#) to go to the 2025 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger.

Vaccine	Recommendation	Date received
Chickenpox (varicella)	First dose between 12–15 months old. Second dose between 4–6 years old. Age 7–18 years without evidence of vaccination have a 2-dose series: • Age 7–12 years: routine interval: 3 months • Age 13 years and older: routine interval: 4–8 weeks	
COVID-19	For the latest COVID-19 vaccination recommendations please visit: cdc.gov/vaccines/covid-19/downloads/COVID-19-immunization-schedule-ages-6months-older.pdf	

Immunizations (continued)

Doses, ages and recommendations vary. [Click here](#) to go to the 2025 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger.

Vaccine	Recommendation	Date received
Diphtheria, tetanus, whooping cough (pertussis)	5-dose series (3-dose primary series at age 2, 4, and 6 months, followed by a booster doses at ages 15–18 months and 4–6 years.	
Flu (influenza)	2 doses, 4 weeks apart, for children between 6 months and 8 years the first time they get the vaccine. 1 dose annually for all persons age 9 years or older.	
Haemophilus influenza type B	4-dose series (3-dose primary series at age 2, 4, and 6 months, followed by a booster dose at age 12–15 months).	
Hepatitis A	2-dose series 6 months apart beginning at age 12–23 months old. Children not previously immunized through 18 years should complete a 2-dose series 6 months apart.	
Hepatitis B	1 dose to all newborns before leaving the hospital, a second dose between 1–2 months and a third dose between 6–18 months.	
HPV (human papillomavirus)	HPV vaccination routinely recommended at age 11–12 years (can start at age 9 years) and catch-up HPV vaccination recommended for all persons through age 18 years if not adequately vaccinated. 2- or 3-dose series depending on age at initial vaccination. • Age 9 through 14 years at initial vaccination: 2-dose series at 0, 6–12 months • Age 15 years or older at initial vaccination: 3-dose series at 0, 1–2 months, 6 months	
Polio	4-dose series at ages 2, 4, 6–18 months, 4–6 years, final dose on or after age 4 years and at least 6 months after the previous dose.	
Measles, mumps, rubella (MMR)	2 dose series at age 12–15 months, age 4–6 years.	
Meningococcal (MenACWY)	Routine vaccination 2-dose series at 11–12 years, 16 years. Catch-up vaccination • Age 13–15 years: 1 dose now and booster at age 16–18 years • Age 16–18 years: 1 dose	

Immunizations (continued)

Doses, ages and recommendations vary. [Click here](#) to go to the 2025 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger.

Vaccine	Recommendation	Date received
Pneumonia (pneumococcal)	• 4-dose series at 2, 4 and 6 months and 12 to 15 months. • 1 dose for healthy children age 2–4 years who did not complete the series.	
Meningococcal serogroup B vaccine	Adolescents not at increased risk age 16–23 years (preferred age 16–18 years) based on shared clinical decision-making.	
Mpox vaccination	Age 18 years and at risk for Mpox infection: 2-dose series, 28 days apart.	
Respiratory Syncytial Virus (RSV)	One dose for all infants 8 months and younger born during or entering the RSV season (Fall through Spring). One dose for children between 8 and 19 months old who are at an increased risk of severe RSV disease and entering their second RSV season.	
Rotavirus	Rotarix: 2-dose series at age 2 and 4 months. RotaTaq: 3-dose series at age 2, 4, and 6 months.	
Tetanus, diphtheria, and pertussis (Tdap)	Age 11–12 years: 1 dose Tdap (adolescent booster).	

Drugs

Prescription required.

Prescription	Recommendation	Date received
Oral fluoride supplements	Starting age 6 months for children without fluoride in their primary water source. For Medicaid Members , pharmacy coverage is provided by NYRx, the New York State Medicaid Pharmacy program.	

Doctor visits and tests

Assessments, screenings and counseling	Recommendation	Date received
Anxiety in children and adolescents screening	At 8 to 18 years.	
Anticipatory guidance	All well child visits.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
Autism screening	At 18 and 24 months.	
Behavioral/social/emotional screening	From newborn to 21 years.	
Bilirubin concentration screening	For newborns.	
Blood pressure	Newborn to 30 months risk assessment to be performed with appropriate action to follow, if positive 3–21 years screening to be performed.	
Critical congenital heart disease screening	Once at birth.	
Depression and suicide risk screening in children and adolescents	Screening for major depressive disorder in adolescents aged 12–18 years.	
Developmental screening	Developmental screenings at 9, 18, and 30 months of age (the 30 month screening can be completed as early as 24 months if the clinical need arises).	
Dyslipidemia screening	Recommended at 24 months, 4 years, 6 years, 8 years, 12 years, 13 years, 14 years, 15 years, 16 years.	
Gonorrhea preventive medication	For the eyes of all newborns to prevent gonococcal ophthalmia neonatorum.	
Hearing loss screening	Recommended at ages: Newborn; between 3–5 days to 2 months; 4 years; 5 years; 6 years; 8 years; 10 years; once between age 11–14 years; once between age 15–17 years; once between age 18–21 years; also recommended for those that have a positive risk assessment.	
Length/height, weight, body mass index and head circumference	Length/height and weight: Newborn–21 years. Body mass index: 24 months to 21 years. Head circumference: Newborn to 18 months. Weight for length: Newborn to 18 months	
Hematocrit or hemoglobin screening (anemia screening)	For all children. At 12 months.	
Hepatitis B screening	Screening between the ages 0–21 years (perform risk assessment for hepatitis B virus (HBV) infection).	
Hepatitis C screening	Starting at age 18–79 years.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
HIV screening	All adults 18+ screen annually. Also recommended anytime between ages 11–14 years, risk assessment to be performed with appropriate action to follow if positive. And after initial screening, youth at increased risk of HIV infection should be retested annually or more frequently if needed.	
PrEP (pre-exposure prophylaxis) HIV prevention medication	Pre-exposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of getting HIV.	
Lead screening	Lead screening at 12 months and 24 months.	
Maternal depression screening	Should be integrated into well child visits at 1 month, 2 months, 4 months and 6 months.	
Medical history	At each well-child visit.	
Metabolic screening panel (newborns)	Age 0–90 days.	
Obesity screening in children and adolescents	Clinicians should screen for obesity in children and adolescents 6 years and older and offer or refer them to comprehensive, intensive behavioral interventions to promote improvements in weight status.	
Prevention of dental caries in children younger than 5 years	Primary care clinicians should prescribe oral fluoride supplements starting at age 6 months for children whose water supply is deficient in fluoride. They should also apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption.	
Sexually transmitted infection (STI) prevention, screening and counseling	Screening and behavioral counseling for all adolescents who are at increased risk for infection.	
Skin cancer prevention	Counseling young adults, adolescents, children and parents of young children about minimizing exposure to ultraviolet (UV) radiation for persons aged 6 months to 24 years with fair skin types to reduce their risk of skin cancer.	
Tobacco, alcohol or drug use assessment	Ages 11–21.	

Doctor visits and tests (continued)

Assessments, screenings and counseling	Recommendation	Date received
Tobacco-use screening and counseling	At each visit for school aged children and adolescents who have not started to use tobacco provide interventions, including education or brief counseling, to prevent initiation of tobacco use.	
Tobacco, Alcohol, or Drug Use Assessment	Risk assessment to be performed from 11-21 years.	
Tuberculosis (TB) testing	For children at higher risk of tuberculosis.	
Vision screening	Vision screening at 3 years, 4 years, 5 years, 6 years, 8 years, 10 years, 12 years, 15 years and when indicated.	



ATTENTION: Language assistance services and other aids, free of charge, are available to you. Call 1-800-303-9626 (TTY: 711). ATENCIÓN: Dispone de servicios de asistencia lingüística y otras ayudas, gratis. Llame al 1-800-303-9626 (TTY: 711). 请注意：您可以免费获得语言协助服务和其他辅助服务。请致电 1-800-303-9626 (TTY: 711)。

H0423_MEM25_3576_C 09252025 MBR 25.361