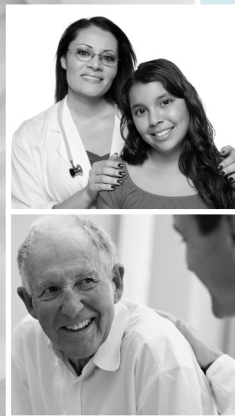




Health & FAMILY

Your Guide to Health & Wellness



IMPORTANT

Molina Healthcare

Phone Numbers:

Member Services:

Covered Families and Children (CFC): 1-800-642-4168
Aged, Blind or Disabled (ABD): 1-866-408-9501
TTY for the hearing impaired: 1-800-750-0750 or 711

24 Hour Nurse Advice Line:

English: 1-888-275-8750 Spanish: 1-866-648-3537
TTY for the hearing impaired:
English: 1-866-735-2929 Spanish: 1-866-833-4703



Your Extended Family.



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Disease Management Programs

Molina Healthcare wants you to know all you can to help you stay healthy. We have programs that can help you manage your condition. You can tell us that you want to be included in the program. This is called self-referral. Another way you can enroll is through your provider. It is your choice to be in these programs. You can choose to be removed from the program at any time. For more details about the programs, please call Member Services or visit www.MolinaHealthcare.com.



- The **breathe with easesm** asthma program is for children and adults ages 2 years and older with asthma. You and/or your child will learn how to manage your asthma and work with your provider.
- The **Healthy Living with Diabetessm** program is for adults age 18 years and older with diabetes. You will learn about diabetes self-care (meal planning, exercise tips, diabetes medicines and much more).

- The **Chronic Obstructive Pulmonary Disease (COPD)** program is for members who are 21 years and older who have emphysema and chronic bronchitis. With this program you can learn how to better control your breathing.
- The **Heart Healthy Living Cardiovascular** program is for members 18 years and older who have one or more of these conditions: coronary artery disease, congestive heart failure or high blood pressure.

motherhood matterssm

motherhood matterssm pregnancy program is a simple program to follow. It can really help you and your baby during and after your pregnancy. Pregnant mothers get support and education as well as follow-up by telephone from nurses or health educators. Special care is given to those who have a high-risk pregnancy. To find out more, just call Molina Healthcare's Member Services Department.



Complex Case Management

Living with health problems and trying to manage those health problems can be hard. Molina Healthcare has a program that can help. The Complex Case Management program is for members with difficult health problems who need extra help with their healthcare needs. The program allows you to talk with a nurse about your health problems. The nurse can help you learn about those problems and teach you how to better manage them. The nurse may also work with your family or caregiver and provider to make sure you get the care you need. There are several ways you can be referred for this program.

- A referral from your provider
- A self-referral through the Health Education line
- A referral from a case manager or care manager at Molina Healthcare
- A self-referral from you or a family member

There are also certain requirements that you must meet. It is your choice to be in these programs. You can choose to be removed from the program at any time.

If you would like more information about the program, please call Member Services. The phone number is listed on your ID card.

Getting the Care You Need

Here are some tips to help you get the healthcare you need:

See your primary care provider (PCP) for a health checkup. Many people wait until they are very sick to see a provider. You do not need to wait. Make sure you schedule a checkup before you get sick. This will help keep you and your children well.

Your PCP will work with you to direct your health care. Your PCP will do your check-ups and shots and treat you for most of your routine health care needs. If needed, your PCP will send you to other doctors (specialists) or admit you to the hospital.

It is important to remember that you must receive services covered by Molina Healthcare from facilities

and/or providers contracted with Molina Healthcare. See your Member Handbook for information on services covered by Molina Healthcare. You can also visit www.MolinaHealthcare.com. The only time you can use providers that are not contracted with Molina Healthcare is for:

- Emergency services
- Federally Qualified Health Centers/Rural Health Clinics
- Certified nurse midwives or certified nurse practitioners
- Qualified Family Planning Providers
- Community Mental Health Centers
- Ohio Department of Alcohol and Drug Addiction Services facilities which are Medicaid providers
- An out-of-panel provider that Molina Healthcare has approved you to see
- Pharmacies for prescription drugs and some prescription medical supplies that are covered by Ohio Medicaid. If you have questions or problems with a pharmacy please contact the Ohio Medicaid Consumer Hotline at 1-800-324-8680 or TTY 1-800-292-3572. You can also visit the website <http://jfs.ohio.gov/ohp/bhpp/meddrug.stm>

If you travel outside the service area, Molina Healthcare pays for emergency care for you. You may go to a local emergency room (ER) or an urgent care clinic. Tell them you are a Molina Healthcare member. Show them your Molina Healthcare ID card. Routine care is not covered by Molina Healthcare if you are outside of the service area unless it is provided at any

- Federally Qualified Health Centers/Rural Health Clinics
- Certified nurse midwives or certified nurse practitioners
- Qualified Family Planning Providers
- Community Mental Health Centers
- Ohio Department of Alcohol and Drug Addiction Services facilities that are Medicaid providers
- An out-of-panel provider that Molina Healthcare has approved you to see
- Pharmacies for prescription drugs and some prescription medical supplies that are covered by Ohio Medicaid

Are you having trouble speaking to your provider in English? You have a right to an interpreter. There is no cost to you. Tell the office staff if you would prefer to talk in your own language.

Protecting Your Privacy

Your privacy is important to us. We respect and protect your privacy. Molina Healthcare uses and shares your information to provide you with health benefits. Molina Healthcare wants to let you know how your information is used or shared.

PHI stands for these words, protected health information. PHI means health information that includes your name, member number or other identifiers, and is used or shared by Molina Healthcare.

Why does Molina Healthcare use or share your PHI?

- To provide for your treatment
- To pay for your health care
- To review the quality of the care you get
- To tell you about your choices for care
- To run our health plan
- To share PHI as required or permitted by law

What are your privacy rights?

- To look at your PHI
- To get a copy of your PHI
- To amend your PHI
- To ask us to not use or share your PHI in certain ways
- To get a list of certain people or places we have given your PHI

How does Molina Healthcare protect your PHI?

Molina Healthcare uses many ways to protect PHI across our health plan. This includes PHI in written word, spoken word or PHI in a computer. Below are some ways Molina Healthcare protects PHI:

- Molina Healthcare has policies and rules to protect PHI.

- Molina Healthcare limits who may see PHI. Only Molina Healthcare staff or contractors with a need to know PHI may use and share PHI.
- Molina Healthcare staff is trained on how to protect and secure PHI, including written and verbal communications.
- Molina Healthcare staff must agree in writing to follow the rules and policies that protect and secure PHI.
- Molina Healthcare secures PHI in our computers. PHI in our computers is kept private by using firewalls and passwords.

What can you do if you feel your privacy rights have not been protected?

- Call or write Molina Healthcare and complain.
- Complain to the U.S. Department of Health and Human Services.

We will not hold anything against you. Your action would not change your health benefits in any way.

The above is only a summary. Our Notice of Privacy Practices has more information about how we use and share our members' PHI. Our Notice of Privacy follows this section. Our Notice of Privacy is also included in your Molina Member Handbook. The Notice is posted on our web site at www.MolinaHealthcare.com. You may also get a copy of our Notice by calling our Member Services Department at 1-800-642-4168.

What must Molina Healthcare do by law?

- Keep your PHI private.
- Give you written information such as this on our duties and privacy practices about your PHI.
- Follow the terms of our Notice of Privacy Practices

About Our Members: Protecting Your Privacy

Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Molina Healthcare of Ohio (“Molina” or “we”) uses and shares protected health information about you to provide your health benefits. We use and share your information to carry out treatment, payment and health care operations. We also use and share your information for other reasons as allowed and required by law. We have the duty to keep your health information private. We have policies in place to obey the law. The effective date of this notice is May 1, 2008.

PHI stands for these words, protected health information. PHI means health information that includes your name, member number or other identifiers, and is used or shared by Molina.

Why does Molina use or share your PHI?

We use or share your PHI to provide you with healthcare benefits. Your PHI is used or shared for treatment, payment, and health care operations.

For Treatment.

Molina may use or share your PHI to give you, or arrange for, your medical care. This treatment also includes referrals between your providers or other health care providers. For example, we may share information about your health condition with a specialist. This helps the specialist talk about your treatment with your provider.

For Payment.

Molina may use or share PHI to make decisions on payment. This may include claims, approvals for treatment, and decisions about medical need. Your name, your condition, your treatment, and supplies given may be written on the bill. For example, we may

let a provider know that you have our benefits. We would also tell the provider the amount of the bill that we would pay.

For Health Care Operations.

Molina may use or share PHI about you to run our health plan. For example, we may use information from your claim to let you know about a health program that could help you. We may also use or share your PHI to solve member concerns. Your PHI may also be used to see that claims are paid right. Health care operations involve many daily business needs. It includes but is not limited to, the following:

- Improving quality
- Actions in health programs to help members with certain conditions (such as asthma)
- Conducting or arranging for medical review
- Legal services, including fraud and abuse programs
- Actions to help us obey laws
- Address member needs, including solving complaints and grievances

We will share your PHI with other companies (“business associates”) that perform different kinds of activities for our health plan. We may also use your PHI to give you reminders about your appointments. We may use your PHI to give you information about other treatments, or other health-related benefits and services.

When can Molina use or share your PHI without getting written authorization (approval) from you?

In addition to treatment, payment and health care operations, the law allows or requires Molina to use and share your PHI for several other purposes including the following: Disclosure of your PHI to family members, other relatives and your close personal friends is allowed if:

- The information is directly relevant to the family or friend’s involvement with your care or payment for that care; and
- You have either orally agreed to the disclosure or have been given an opportunity to object and have not objected.

Required by law.

We will use or share information about you as required by law. We will share your PHI when required by the Secretary of the Department of Health and Human Services (HHS).

Public Health.

Your PHI may be used or shared for public health activities. This may include helping public health agencies to prevent or control disease.

Health Care Oversight.

Your PHI may be used or shared with government agencies. They may need your PHI for audits.

Research

Your PHI may be used or shared for research in certain cases, when approved by a privacy or institutional review board.

Legal or Administrative Proceedings

Your PHI may be used or shared for legal proceedings, such as in response to a court order.

Law Enforcement

Your PHI may be used or shared with police to help find a suspect, witness or missing person.

Health and Safety

PHI may be shared to prevent a serious threat to public health or safety.

Government Functions

Your PHI may be shared with the government for special functions, such as national security activities.

Victims of Abuse, Neglect or Domestic Violence

Your PHI may be shared with legal authorities if we believe that a person is a victim of abuse or neglect.

Workers Compensation

Your PHI may be used or shared to obey Workers Compensation laws.

Other Disclosures

PHI may be shared with funeral directors or coroners

to help them do their jobs.

When does Molina need your written authorization (approval) to use or share your PHI?

Molina needs your written approval to use or share your PHI for a purpose other than those listed in this notice. You may cancel a written approval that you have given us. Your cancellation will not apply to actions already taken by us because of the approval you already gave to us.

What are your health information rights?

You have the right to:

Request Restrictions on PHI Uses or Disclosures (Sharing of Your PHI)

You may ask us not to share your PHI to carry out treatment, payment or health care operations. You may also ask us to not to share your PHI with family, friends or other persons you name who are involved in your health care. However, we are not required to agree to your request. You will need to fill out a form to make your request.

Request Confidential Communications of PHI

You may ask Molina to give you your PHI in a certain way or at a certain place to help keep your PHI private. We will follow reasonable requests, if you tell us how sharing all or a part of that PHI could put your life at risk. You will need to fill out a form to make your request.

Review and Copy Your PHI

You have a right to review and get a copy of your PHI held by us. This may include records used in making coverage, claims and other decisions as a Molina member. You will need to fill out a form to make your request. We may charge you a reasonable fee for copying and mailing the records. In certain cases we may deny the request.

Amend Your PHI

You may ask that we amend (change) your PHI. This involves only those records kept by us about you as a member. You will need to fill out a form to make your request. You may file a letter disagreeing with us if we deny the request.

Receive an Accounting of PHI Disclosures (Sharing of your PHI)

You may ask that we give you a list of certain parties that we shared your PHI with during the six years prior to the date of your request. The list will not include PHI shared as follows:

- for treatment, payment or health care operations;
- to persons about their own PHI;
- sharing done with your authorization,
- incident to a use or disclosure otherwise permitted or required under applicable law;
- as part of a limited data set for research or public health activities;
- PHI released in the interest of national security or for intelligence purposes; to correctional institutions having custody of an inmate; or
- shared prior to April 14, 2003

We will charge a reasonable fee for each list if you ask for this list more than once in a 12-month period. You

must fill out a form to request a list of PHI disclosures. You may make any of the requests listed above, or may get a paper copy of this Notice. Please call our Manager of Member Services at 1-800-642-4168, TTY 1-800-750-0750.

What can you do if your rights have not been protected?

You may complain to Molina and to the Department of Health and Human Services if you believe your privacy rights have been violated. We will not do anything against you for filing a complaint. Your care will not change in any way.

You may complain to us at:

Member Services Department
Molina Healthcare of Ohio, Inc.
P.O. Box 349020
Columbus, OH 43234-9020

You may file a complaint with the Secretary of the U.S. Department of Health and Human Services at:

Office of Civil Rights

U.S. Department of Health & Human Services

233 N. Michigan Ave. - Suite 240

Chicago, IL 60601

(312) 886-2359; (312) 353-5693 (TDD)

(312) 886-1807 FAX

What are the duties of Molina?

Molina is required to:

- Keep your PHI private
- Give you written information such as this on our duties and privacy practices about your PHI
- Follow the terms of this Notice

This Notice is Subject to Change

Molina reserves the right to change its information practices and terms of this notice at any time. If we do, the new terms and practices will then apply to all

PHI we keep. If we make any material changes, a new notice will be sent to you by US Mail.

Contact Information

If you have any questions, please contact the following office:

Member Services Department

Molina Healthcare of Ohio, Inc.

P.O. Box 349020

Columbus, OH 43234-9020

Toll Free:

1-800-642-4168

TTY 1-800-750-0750

Check out the Molina Healthcare Website

Check out our website at **www.MolinaHealthcare.com**. Click on the member button, then choose your state in the drop-down box. You can get information on our website about:

- Molina Healthcare's contracted doctors and hospitals
- Your benefits
- What to do if you get a bill or a claim
- How to contact Utilization Management staff about a UM issue or question
- How to get primary care, hospital, specialty, and emergency services
- How to get care after normal office hours
- Preventive health guidelines and immunization schedule
- Your rights and responsibilities and the privacy of your information
- Restrictions on benefits or how to obtain care outside the Molina Healthcare service area
- Quality Improvement, Health Education, and Disease Management programs
- How to voice a complaint or appeal a medical decision
- How we decide about using new technology

You can ask for printed copies of anything posted on the website by calling Member Services. Your Member Handbook is also a good resource. You can find it on our website.

Online Provider Directory

Molina Healthcare has an online provider directory so that you can find information on our providers. You can even search for one in your area. To access the online provider directory, visit www.MolinaHealthcare.com. Click on “Find a Provider”. Follow the instructions to search for a provider. The provider online directory includes information, such as:



- A current list of Molina Healthcare providers
- A provider's board certification status. You can also visit the American Board of Medical Specialties at www.abms.org to check if a provider is board certified.
- Providers accepting new patients
- Languages spoken by the provider or staff
- Hospital information including name, location and accreditation status

If you don't have access to the internet, Member Services can help. They can send you a printed copy of all information in the provider online directory.

We Want to Give You Good Care!

Molina Healthcare works with your providers to give you good healthcare. We make choices about your care based on what you need. We also look at your benefits. We do not reward providers to deny you care. We also do not reward staff or other people to deny you care or give you less care. We do not pay extra money to providers or our staff members to deny tests or treatments that you need to get better or stay healthy.

If you ever have a concern about your healthcare, you can call our Member Services team. You can also talk to our nurses about getting needed care. Our staff is here to take your call Monday through Friday (except holidays) between 7:00 a.m. and 7:00 p.m. They can answer questions about how we make health care choices. Just call the toll-free Member Services number listed on the back of your I.D. card. If you call after business hours or over the weekend, please leave a message and your phone number. If your question is

related to an authorization for services, the Utilization Management staff will call you back during the next normal business day.

After Hours Care

There may be times when you need care and your primary care provider (PCP) is not available. If it is after hours and your PCP's office is closed you can call Molina Healthcare's Nurse Advice Line. Nurses are available to help you at any time of the day. Call 1-888-275-8750, 24 hours a day, 7 days a week. Molina Healthcare's Nurse Advice Line has highly trained nurses.

They can help you decide if you or your child should see a provider right away. The nurses can also help you make an appointment if you need to see a provider quickly. Sometimes you might have questions but you do not think you need to see your PCP. You can call the Nurse Advice Line and talk to a nurse. They will help you.

Emergency Care

Emergency care is for sudden or severe problems that need care right away. It can also be care that is needed if your life or health is in danger. Emergency care is covered. If you need emergency care, call 911 or go to the nearest hospital. You do not need prior approval. You can also call Molina Healthcare's Nurse Advice Line. Highly trained nurses are available to help you at any time of the day. Call 1-888-275-8750, 24 hours a day, 7 days a week.

Looking at What's New

We also look at new services. And we look at new uses for benefits you have now. We review new studies to see if new services are proven to be safe and if they should be added to your benefit package. Molina Healthcare reviews the type of services listed below at least once a year:

- Medical services
- Mental health services
- Medicines
- Equipment



Molina Healthcare Patient Safety Program:

Molina Healthcare has a Patient Safety Program to help keep you and your family safe and healthy. Here are a few of the things we do to improve your safety:



- Publish articles on patient safety in our member newsletter.
- Promote your relationship with your primary care provider (PCP) to help coordinate and manage your care.
- Work with our providers to investigate and resolve any safety issues.
- Publish Clinical Care Guidelines to assist our providers in giving you appropriate care.

- Check safety ratings of hospitals on several websites:
 - The Leap Frog Group -
“<http://www.leapfroggroup.org>”
www.leapfroggroup.org
 - Joint Commission -
“<http://www.jointcommission.org>”
www.jointcommission.org
 - Ohio Hospital Compare -
<http://ohiohospitalcompare.ohio.gov/>

Call our Member Services Department to get more information about our Patient Safety Program. You can also visit us online at www.MolinaHealthcare.com.



Behavioral Health

Molina Healthcare offers behavioral health services to help with problems such as stress, depression or confusion. There are services to help with substance use as well. Your PCP can offer a brief screening and help guide you to services. There are many types of services you can access. These types of problems can be treated. Molina Healthcare is ready to assist you in finding what support or service you need.

We Care About Your Health

Improving Services to Molina Healthcare Members

Your healthcare is important to us, so we want to hear how we are doing. That's why you may receive a survey about Molina Healthcare and your healthcare. One of these surveys is called CAHPS.

CAHPS stands for Consumer Assessment of Healthcare Providers and Systems. This survey asks questions about the care you or your child receives from Molina Healthcare. Please take the time to complete the survey if you receive it.

HEDIS® is a tool Molina Healthcare uses to improve care. HEDIS stands for Healthcare Effectiveness Data and Information Set. This is a process where we collect information on services that you or your child may have received. These services include shots, well-child exams, Pap and mammogram screenings, diabetes care, and prenatal and after-delivery care. Through this process we can find out how many of our members actually got needed services. This information is made available to you. It can be used to compare one health plan to another plan.

Each year Molina Healthcare strives to improve all services provided. This is done by setting goals. These goals are included in a Quality Improvement (QI) plan. Our goal is to help you take better care of yourself and your family. We may send you a few questions about how we are doing and what is important to you.



As part of the QI plan, Molina Healthcare helps you take care of your health and get the best service possible.

Some of the ways we do this include:

- Reminders about getting well-child exams and immunizations
- Asthma and diabetes education
- Education on prenatal care and after-delivery exams
- Reminders about getting Pap and mammogram screenings
- Better processing of member complaints
- Help finding the Molina Healthcare website
- Telling you about special services for members

To learn more or to request a copy of our QI plan, call your Molina Healthcare Member Services Team.

Your Rights as A Molina Healthcare Member

Did you know that as a member of Molina Healthcare you have certain rights and responsibilities? Knowing your rights and responsibilities will help you, your family, your provider and Molina Healthcare ensure that you get the covered services and care that you need.

You have the following rights:

- To receive all services that Molina Healthcare must provide
- To be treated with respect with regard for your dignity and privacy
- To be able to take part in choices about your healthcare
- To be able to file a grievance (complaint) about Molina Healthcare services, the providers or the care you received
- To change your primary care provider (PCP)

- To talk about medically necessary treatment options with your provider

You also have the following responsibilities:

- To learn and ask questions about your health benefits
- To give information to your provider or Molina Healthcare that is needed to care for you and your family
- To follow the care plan that you have agreed on with your provider
- To keep appointments and be on time. If you're going to be late or cannot keep an appointment, call your provider
- To report any fraud or wrongdoing to Molina Healthcare or the proper authorities
- To inform Molina Healthcare of any changes of address, telephone number, or any changes that could affect your eligibility

Second Opinions

If you do not agree with your provider's plan of care for you, you have the right to get a second opinion from a qualified provider on Molina Healthcare's panel. If a qualified provider is not able to see you, Molina Healthcare must set up a visit with a provider not on our panel. This service is at no cost to you.

Out-of-Network Services

If a Molina Healthcare provider is unable to provide you with necessary and covered services, Molina Healthcare will cover the needed services through an out-of-network provider. This will be done in a timely manner for as long as Molina Healthcare is unable to provide the service.

These are only a few of your rights and responsibilities. For a list of all your rights and responsibilities, look in your Member Handbook, visit the Molina Healthcare website at www.MolinaHealthcare.com or call Member Services.

Grievances and Appeals

Are you having problems with your medical care or our services? If so, you have a right to file a grievance or appeal.

A grievance is a complaint and can be for things like:

- The care you get from your healthcare provider;
- The time it takes to get an appointment or be seen by a provider or;
- Provider availability in your area.
- If you are unhappy with anything about Molina Healthcare

An appeal can be filed when you do not agree with Molina Healthcare's decision to:

- Deny a request to cover a service for you;
- Reduce, suspend or stop care you are already receiving;
- Deny payment for a service you received that is not covered by Molina Healthcare.

An appeal must be filed within 90 calendar days.

You may also request a state hearing if Molina Healthcare denies healthcare services for you. You may expedite your request if a delay in the decision may risk your health. Check our website, www.MolinaHealthcare.com or your Member Handbook to read about filing a grievance (complaint) or appeal or requesting a State Hearing.

You Have a Right to Appeal a Denial

What is a denial?

A denial means Molina Healthcare has made a decision to:

- Deny a request to cover a healthcare service for you;
- Reduce, suspend or stop care you are already receiving;
- Deny payment for a service you received that is not covered.

If your service or claim is denied, you will get a letter from Molina Healthcare telling you about this decision. This letter will tell you about your right to appeal. You can read about these rights in your Member Handbook. You can find out how to file an appeal on our website, www.MolinaHealthcare.com.

Member Services also can help you file an appeal. You also have the right to ask for a state hearing. We will send a form for a state hearing in the letter notifying you of a denial. Please refer to your Member Handbook for more information about your right to ask for a state hearing. And you can always call Member Services and ask them to help you.

We Are Here to Help You

It can be hard for members to get the care they need when receiving health services for ongoing health problems. If you are one of these members, Molina Healthcare is here to help. To make sure you receive the proper care, our staff can help you coordinate your care. Molina Healthcare staff can:

- Help you find services that are not benefits, including community and social services.
- Help you access services that you are eligible to receive.
- Help coordinate appointments and tests.
- Help coordinate transportation.
- Help you and/or your caregivers access resources to help you deal with day-to-day stress if you have special healthcare needs.

- Help you and your family coordinate moving you from one setting to another. This can include being discharged from the hospital.

Please call Member Services to learn more about how we can help you get the care you need.

Your Right to an Advance Directive

Many people today worry about the medical care they would get if they became too sick to make their wishes known. You have the right to choose your own medical care. If you don't want a certain type of care, you have the right to tell your provider you don't want it.

You fill out an advance directive while you're able to act for yourself. The advance directive lets your provider and others know your wishes about medical care.

Under Ohio law, there are four different forms, or advance directives, you can use. You can use a Living Will, a Declaration for Mental Health Treatment, a

Durable Power of Attorney for medical care or a Do Not Resuscitate (DNR) Order. Many of the people and places that give you medical care have advance directive forms. Call Molina Healthcare Member Services if you have any questions about how to get a form.

You do not have to fill out an advance directive to get medical care. No one can make you fill out an advance directive. You decide if you want to fill one out.

See your Molina Healthcare Member Handbook for a complete explanation of advance directives or visit **www.MolinaHealthcare.com**.

Women's Healthcare Services

You can get women's health care services from any provider who has a contract with Molina Healthcare or any Qualified Family Planning Provider. You do not need a referral from your PCP. This may include services such as:

- Pap tests
- Mammograms
- Family planning



Preventive Health

Infants and Children (0 to 23 months)

Well Visits: 1, 2, 4, 6, 9, 12, 15, 18 months

- Immunizations
- Physical examination
- Developmental assessment
- Behavioral assessment
- Lead testing
- Hearing & vision screenings
- TB test
- First dental screening at 1 year and then every six months
- Anticipatory Guidance

Children and Adolescents (2 to 19 years old)

Well Visits: 24 months, 30 months, 3 years, and yearly thereafter

- Immunizations
- HIV, STD test for sexually active teens
- Pap test, Chlamydia
- Hearing & vision screenings
- Anticipatory Guidance
- Height, weight & body mass index (BMI)

Adults (20 to 64 years old)

Well Visits: Every 1 – 3 years

- Immunizations
- Height, weight & body mass index (BMI)
- Blood Pressure: Yearly

- Cholesterol screening: Every 5 years
- Colorectal cancer screening: Every 5-10 years based on provider recommendations

Women:

- Chlamydia & STD for sexually active women 25 & younger. Other asymptomatic women at increased risk for infection
- Mammogram: Yearly for 40 years of age and over
- Pap test & pelvic exam: Yearly

Older Adults (65 years and older)

Well Visits: Every 1 – 3 years

- Immunizations
- Vision & hearing
- Bone density for osteoporosis: 65 years & older. 60 and older at increased risk for osteoporotic fractures

Men:

- Abdominal Aortic Aneurysm (AAA) screening: once for men 65 to 75 years of age who have ever smoked

Prenatal and Perinatal

All pregnant women should receive timely prenatal visits in the first trimester and throughout the pregnancy.

First Trimester: Get prenatal care as soon as you know you are pregnant.

Second Trimester: Monthly

Third Trimester: Every 2 weeks

Postpartum: 21 – 56 days after delivery

Child and Adolescent Immunization Schedule

Vaccine	Months									Years						
	Birth	1	2	4	6	12	15	18	19-23	2-3	4-6	5	6	11	12	13-19
Hepatitis B	HepB	HepB			HepB											
Rotovirus			RV	RV	RV											
Diphtheria, Tetanus, Pertussis			DTaP	DTaP	DTaP		DTaP				DTaP			Tdap		
Haemophilus Influenzae Type B			Hib	Hib	Hib	Hib										
Pneumococcal			PCV	PCV	PCV	PCV										
Inactivated Poliovirus			IPV	IPV	IPV											
Influenza					Influenza (Yearly)											
Measles, Mumps, Rubella						MMR					MMR					
Varicella						Varicella					Varicella					
Hepatitis A						HepA (2 doses)										
Meningococcal														MCV		
Human Papillomavirus														HPV (3 doses)		

Adult Immunization Schedule

Vaccine	19-26	27-49	50-59	60-64	65 & older
Influenza	Yearly				
Pneumococcal ¹					1 dose
Tetanus, diphtheria, pertussis (Td, Tdap) ¹	1 dose Tdap, Td every 10 years				Td every 10 years
Measles, Mumps, Rubella (MMR) ¹	1 or 2 doses				
Varicella (Chickenpox) ¹	2 doses				
Zoster (Shingles) ¹				1 dose	
Hepatitis A (HepA) ²	2 doses				
Hepatitis B (HepB) ²	3 doses				
Meningococcal ²	1 or more doses				
Women					
Human Papillomavirus (HPV)	3 doses				

¹If no proof of vaccine or immunity

²If at high risk





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