MIND THE GAP
GET PREVENTIVE CARE

Preventive Health
Guidelines for Adults

Primary Care Visits & General Screenings

- ☐ **Routine check-up**
  Once a year
- ☐ **Depression & anxiety screening**
  Once a year
- ☐ **Pelvic & breast exam** (women)
  Once a year
- ☐ **Blood pressure screening**
  Once a year
- ☐ **Cholesterol (lipid) screening**
  Every 5 years; more often if high risk
- ☐ **Diabetes screening**
  Every 3 years for adults ages 40+

Immunizations

- ☐ **COVID-19**
  Per doctor's recommendation and CDC guidelines
- ☐ **Flu**
  Once a year
- ☐ **Shingles**
  Two doses for adults ages 50+

Cancer Screenings

- ☐ **Colon and rectal cancer screening (including colonoscopy)**
  Every 1–10 years for adults ages 45+; more often if high risk
- ☐ **Lung cancer screening**
  Once a year for current smokers ages 50+ or those who quit smoking within the past 15 years
- ☐ **Skin cancer screening**
  Once a year
- ☐ **Breast cancer screening** (women)
  Mammogram once a year for women ages 40+, or ages 30+ if high risk
- ☐ **Cervical cancer screening** (women)
  PAP test once every 3 years for women ages 21–29; PAP and HPV test once every 5 years for women 30+
- ☐ **Prostate cancer screening** (men)
  Once a year for men ages 40+ with family history; once every 2–3 years for men ages 50+ with no family history

Most health plans fully cover the recommended preventive care services at an in-network provider, so you pay $0 out-of-pocket. Be sure to verify your individual benefits by calling the phone number on the back of your medical and prescription ID card. If a service is not considered preventive or you don't fall within the coverage guidelines, copays, coinsurance, or deductible charges may apply.

For a complete list of preventive care services for all ages, please visit **myschoolbenefits.org**. Select the appropriate menu tab (IBX Benefits or Highmark Benefits) and then select the Medical and Prescription Drug sub menu tab.

PAISBOA
Health Benefit Trust

Rev. 10/2026