

# Preventive Care

## Under the Affordable Care Act (ACA)

# Men

### Preventive care benefits for adults

All Marketplace health plans and many other plans must cover the following list of preventive services without charging you a copayment or coinsurance. This is true even if you haven't met your yearly deductible.

- Abdominal aortic aneurysm one-time screening for men of specified ages who have ever smoked
- Alcohol misuse screening and counseling
- Aspirin use to prevent cardiovascular disease for men and women of certain ages
- Blood pressure screening
- Cholesterol screening for adults of certain ages or at higher risk
- Colorectal cancer screening for adults over 50
- Depression screening
- Diabetes (Type 2) screening for adults with high blood pressure
- Diet counseling for adults at higher risk for chronic disease
- Hepatitis B screening for people at high risk, including people from countries with 2% or more Hepatitis B prevalence, and U.S.-born people not vaccinated as infants and with at least one parent born in a region with 8% or more Hepatitis B prevalence.
- Hepatitis C screening for adults at increased risk, and one time for everyone born 1945 – 1965
- HIV screening for everyone ages 15 to 65, and other ages at increased risk
- Immunization vaccines for adults — doses, recommended ages, and recommended populations vary:
  - ◆ Diphtheria
  - ◆ Hepatitis A
  - ◆ Hepatitis B
  - ◆ Human Papillomavirus (PVU)
  - ◆ Herpes Zoster
  - ◆ Influenza (flu shot)
  - ◆ Measles
  - ◆ Meningococcal
  - ◆ Mumps
  - ◆ Pertussis
  - ◆ Pneumococcal
  - ◆ Rubella
  - ◆ Tetanus
  - ◆ Varicella (Chickenpox)
- Lung cancer screening for adults 55 - 80 at high risk for lung cancer because they're heavy smokers or have quit in the past 15 years
- Obesity screening and counseling
- Sexually transmitted infection (STI) prevention counseling for adults at higher risk
- Syphilis screening for adults at higher risk
- Tobacco Use screening for all adults and cessation interventions for tobacco users

## How to get Marketplace dental coverage?

- When you complete your Marketplace application and get your results, you can select a health plan that include dental coverage. If you decide you want a stand-alone dental plan, you can choose one after you select your health plan.
- Dental plan categories: High and low
- There are 2 categories of Marketplace dental plans: High and low coverage levels.
- The high coverage level has higher premiums but lower copayments and deductibles. So you'll pay more every month, but you'll pay less when you use dental services.
- The low coverage level has lower premiums but higher copayments and deductibles. So you'll pay less every month, but you'll pay more when you use dental services.

## When you compare dental plans in the Marketplace, you'll find details about each plan's costs, copayments, deductibles, and services covered.

- Adult and child dental insurance in the Marketplace
- Under the health care law, dental insurance is treated differently for adults and children 18 and under.
- **Dental coverage for children is an essential health benefit.** This means if you're getting health coverage for someone 18 or younger, dental coverage **must be available** for your child either as part of a health plan or as a stand-alone plan. **Note:** While dental coverage for children must be **available** to you, you **don't** have to buy it.
- **Dental coverage isn't an essential health benefit for adults.** Insurers don't have to offer adult dental coverage.
- Under the health care law, most people must have health coverage or pay a fee. Dental coverage is optional, even for children. So you don't need it to avoid the penalty.

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