Coverage for children’s preventive health services

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

- Alcohol and drug use assessments for adolescents
- Autism screening for children at 18 and 24 months
- Behavioral assessments for children ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Blood pressure screening for children ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Cervical dysplasia screening for sexually active females
- Depression screening for adolescents
- Developmental screening for children under age 3
- Dyslipidemia screening for children at higher risk of lipid disorders ages: 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Fluoride chemoprevention supplements for children without fluoride in their water source
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening for all newborns
- Height, weight and body mass index (BMI) measurements for children ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Hematocrit or hemoglobin screening for all children
- Hemoglobinopathies or sickle cell screening for newborns
- Hepatitis B screening for adolescents at high risk, including adolescents from countries with 2% or more Hepatitis B prevalence, and U.S.-born adolescents not vaccinated as infants and with at least one parent born in a region with 8% or more Hepatitis B prevalence: 11 – 17 years.
- HIV screening for adolescents at higher risk
- Hypothyroidism screening for newborns
- Immunization vaccines for children from birth to age 18 — doses, recommended ages, and recommended populations vary:
  - Diphtheria, Tetanus, Pertussis (Whooping Cough)
  - Haemophilus influenzae type b
  - Hepatitis A
  - Hepatitis B
  - Human Papillomavirus (PVU)
  - Inactivated Poliovirus
  - Influenza (flu shot)
  - Measles
  - Meningococcal
  - Pneumococcal
  - Rotavirus
  - Varicella (Chickenpox)
- Iron supplements for children ages 6 to 12 months at risk for anemia
- Lead screening for children at risk of exposure
- Medical history for all children throughout development ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Obesity screening and counseling
- Oral health risk assessment for young children ages: 0 to 11 months, 1 to 4 years, 5 to 10 years
- Phenylketonuria (PKU) screening for newborns
- Sexually transmitted infection (STI) prevention counseling and screening for adolescents at higher risk
- Tuberculin testing for children at higher risk of tuberculosis ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Vision screening for all children
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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