

Your 2025 Healthcare Benefit Guide

District of Columbia Government *for employees hired after October 1, 1987*



With Care, CareFirst.

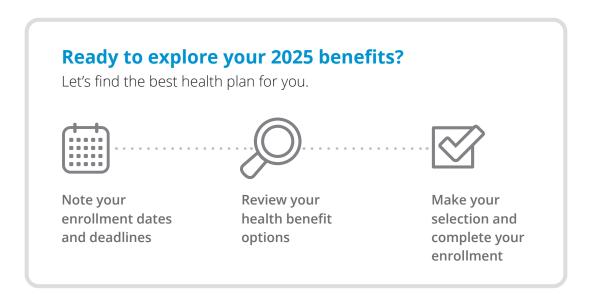


Recognized as one of the World's Most Ethical Companies®

Welcome

We're glad you're considering CareFirst BlueCross BlueShield (CareFirst). We know there's a lot of information to review when selecting your health plan. We hope this simplified guide provides information that makes choosing CareFirst an easy decision.

Inside, you'll find information that'll help you select the plan that's best suited to your needs. Whichever plan you choose, you'll have coverage that's recognized and accepted by more top doctors than any other network. Plus, you'll know that you have the support of a team that's working everyday to improve the healthcare experience of every member.



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It helps to understand some key terms

CareFirst member cost: The maximum amount providers can charge CareFirst members for a specific service.

Deductible: Depending on your plan, you'll need to pay for some services on your own until you reach your deductible. Then your plan starts helping with the cost of your care.

Out-of-pocket maximum: The most you'll pay for covered services in a plan year. After you spend this amount on care costs, your plan will pay 100% of the CareFirst member costs for the rest of the plan year.

The personas represented in this decision guide are not real. The personas and quotes are used for illustrative purposes only.



Choosing the right plan

Everyone has their own personal needs and concerns when it comes to healthcare. We hope you'll take a few minutes to consider what features are most important to you. Here are some examples:



Felipe
32 YEARS OLD
FORKLIFT OPERATOR
MARRIED

Felipe is young and healthy, and generally sees the doctor only when something bothers him. At this point in his life, he's more interested in saving money than having a wide variety of options.

FELIPE WANTS A HEALTH PLAN THAT:

- Fits within a budget
- Has value for what he pays



Susanne
45 YEARS OLD
IT MANAGER
MARRIED WITH
2 CHILDREN

Susanne is a hard-working mom with a high-stress job and active teenage kids. She needs affordable care for her family and help managing her son's type 1 diabetes.

SUSANNE WANTS A HEALTH PLAN THAT:

- Has access to quality care when and where she needs it
- Helps her manage the costs of medications



Elizabeth
59 YEARS OLD
SALES DIRECTOR
DIVORCED

Elizabeth is an active empty-nester. She wants to know that she's got the resources she needs to cover any unexpected expenses, but doesn't want to feel overwhelmed with options.

ELIZABETH WANTS A HEALTH PLAN THAT:

- Includes a robust wellness program
- Provides coverage when she travels



Matt
29 YEARS OLD
SOCIAL WORKER
SINGLE

Matt spends much of his free time with his faithful yellow lab, but he's looking forward to buying a house. Saving money is his immediate goal, but not at the expense of having reliable, basic coverage.

MATT WANTS A HEALTH PLAN THAT:

- Has a low monthly paycheck deduction
- Offers discounts for gym memberships

Medical plan highlights

Let's compare some of your in-network costs for common services with these plans.

with these plans.	
	National Plan
Costs to consider	
In-network Deductible You'll pay the full CareFirst member cost for some services until you reach your deductible	\$750 individual/\$1,500 family
Out-of-pocket Maximum The most you'll pay for covered in-network services in a plan year	Medical: \$1,500 ind./ \$3,000 family Rx: \$5,100 ind./\$10,200 family
Plan Includes Out-of-network Coverage	Yes
Staying healthy	
Annual Physical Exam	\$0 per visit
Preventive Screenings and Immunizations	\$0 per visit
Provider services	
Primary Care Provider (PCP)	\$15 per visit
Specialist (e.g. Dermatologist)	\$15 per visit
Mental Health Professional—Office	\$15 per visit
Urgent Care	\$25 per visit
Emergency Room	\$100 per visit (this charge waived if admitted)
Allergy Shots	\$15 per visit
Imaging (MRA/MRS, MRI, PET, CT Scans) (non-hospital facility)	After deductible is met, 15% of the CareFirst member cost
Labs (non-hospital facility)	After deductible is met, 15% of the CareFirst member cost
X-rays (non-hospital facility)	After deductible is met, 15% of the CareFirst member cost
Physical, Speech and/or Occupational Therapy	After deductible is met, 15% of the CareFirst member cost
Chiropractic	After deductible is met, 15% of the CareFirst member cost
Outpatient Surgery (surgical center)	After deductible is met, 15% of the CareFirst member cost
Inpatient Surgery (including maternity)	After deductible is met, 15% of the CareFirst member cost
Assisted Reproductive Technology	After deductible is met, 50% of the CareFirst member cost
Durable Medical Equipment	After deductible is met,15% of the CareFirst member cost

Costs shown are for care received in-network and, except for emergency room, at non-hospital locations. See your Summary of Benefits for limitations and plan details.

Regional Plan	CDHP Plan		
None	\$1,650/\$3,300		
Medical: \$3,500 ind./ \$9,400 family combined Medical & Rx	\$3,000/\$6,550		
No	Yes		
\$0 per visit	\$0 per visit		
\$0 per visit	\$0 per visit		
\$10 per visit	After Deductible is met, \$30 per visit		
\$20 per visit	After Deductible is met, \$30 per visit		
\$10 per visit	After Deductible is met, \$30 per visit		
\$20 per visit	After Deductible is met, \$75 per visit		
\$100 per visit (this charge waived if admitted)	After Deductible is met, \$300 per visit (this charge waived if admitted)		
\$10 PCP/\$20 Specialist per visit	After Deductible is met, \$5 per visit		
\$0 per visit	After Deductible is met, \$30 per visit		
\$0 per visit	After Deductible is met, \$30 per visit		
\$0 per visit	After Deductible is met, \$30 per visit		
\$10 per visit	After Deductible is met, \$30 per visit		
\$10 per visit	After Deductible is met, \$30 per visit		
\$50 per visit	After Deductible is met, \$300 per visit		
\$100 per admission	After Deductible is met, \$300 per admission		
50% of the CareFirst member cost	After Deductible is met, 50% of CareFirst member cost		
50% of the CareFirst member cost	After Deductible is met, 30% of CareFirst member cost		

Prescription drug plan highlights

Here are your costs for prescription drugs from a participating pharmacy.

	Prescription Drug Plan		
Costs to consider			
Prescription Plan Tier	Formulary 3		
Prescription Deductible	\$0		
Up to 34-day supply			
Generic Drugs (Tier 1)	\$20		
Preferred Brand Drugs (Tier 2)	\$40		
Non-preferred Brand Drugs (Tier 3)	\$55		
Preferred Specialty Drugs (Tier 4)*	\$40		
Non-preferred Specialty Drugs (Tier 5)*	\$55		
90-day supply			
Generic Drugs (Tier 1)	\$20		
Preferred Brand Drugs (Tier 2)	\$40		
Non-preferred Brand Drugs (Tier 3)	\$55		
Preferred Specialty Drugs (Tier 4)*	\$40		
Non-preferred Specialty Drugs (Tier 5)*	\$55		

^{*} Specialty drugs only available when purchased by Mail Order.

Visit **carefirst.com/rx** for the most up-to-date drug lists and other important information. Benefit designs are subject to and may be impacted by certain state regulations.

Restricted Generics Program

Generic drugs will be used for all your prescriptions. If you prefer the brand, you will pay the non-preferred brand copay in addition to the difference between the generic and the brand drug. If a generic version is not available, you will only pay the copay.

Specialty Pharmacy Coordination Program

Members taking high-cost drugs for complex health conditions receive one-on-one care support.

CVS Caremark Mail Service

Sign up for a 90-day supply by mail and you'll only pay the cost of a 60-day supply. Save money and time by refilling prescriptions with CVS Caremark Mail Service Pharmacy.

Perks included with every plan





Achieve your well-being goals with the help of programs for weight management, tobacco cessation and more



Enjoy exclusive discounts through our Blue365 program on things like fitness gear, gym memberships, meal delivery services, hotels and travel



Get inspired to be your healthiest by completing fun activities through your well-being program



Pay nothing for annual in-network preventive care and 24-Hour Nurse Advice Line

"I take advantage of the hotel discounts through Blue365."



"I lost 30 lbs. with the help of my coach and the Noom program."



"I like knowing I can call the 24-hour nurse line at any time."



Patient-Centered Medical Home

Our Patient-Centered Medical Home (PCMH) program focuses on the relationship between you and your primary care provider (PCP)—whether a physician or nurse practitioner. It's designed to provide your PCP with a more complete view of your health and of the care you're receiving from other providers.

With the CareFirst PCMH Program, your PCP will:

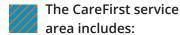
- Coordinate your care with all your healthcare providers, including specialists, labs, pharmacies and mental health facilities
- Proactively manage how your care for one condition may impact other health needs or healthcare services that you have
- Help you get access to the most appropriate and affordable care based on your needs

- Review your medications and possible drug interactions with you
- Review your health records for duplicate tests or services already ordered or performed by another provider

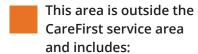
The PCMH Program is available only within the CareFirst service area.

CareFirst service Area





Maryland, District of Columbia, the cities of Alexandria and Fairfax, the town of Vienna, Arlington County, the areas of Fairfax and Prince William Counties in Virginia lying east of Route 123. Members receiving care within the service area can choose either the Regional or National plan.



The areas of Fairfax and Prince William Counties in Virginia lying west of Route 123. Members receiving care outside of the service area should choose the National plan.

With CareFirst, you get so much more

Unmatched access

With 95% of national providers¹ and 99% of local providers² within our Blues network, you have the **broadest** access to care.

Comprehensive care

Our comprehensive care approach meets you where you are, ensuring you have a consistent, whole health experience that helps you better manage your physical, emotional, social and financial well-being.

Local expertise

Our extensive and long-standing local relationships give you **unparalleled access to providers and community organizations**, resulting in enhanced care coordination and improved health outcomes.

Innovative member solutions

Beyond health coverage, you have access to our **comprehensive portfolio of best-in-class member solutions** to help you achieve your best health in all stages of life, health and conditions.



1 in 2 Americans are covered by Blue regionally, 1 in 3 nationally³



Most chosen health plan in the Mid-Atlantic, serving 3.5 million members



A not-for-profit company driven by mission



Access to 1.7 million U.S. providers⁴



CareFirst is proud to be recognized as one of the World's Most Ethical Companies® for 12 consecutive years.

- ¹ CHP Network Compare Findings, Q3 2017
- ² CareFirst Book of Business Data, August 2020
- ³ BCBSA Blue Facts, February 2022
- ⁴ Provider Data Repository (PDR), January 2021

So many options for when you need care

Establishing a relationship with a primary care provider (PCP) is the best way to receive consistent, quality care. But when life makes that difficult, CareFirst offers so many other ways to get the care you need.

	Needs or symptoms such as:	Virtual option
CloseKnit Virtual Care		
CloseKnit offers 24/7/365 virtual-first primary care, urgent care*, mental health and other specialty services. * Primary care available to members and dependents ages 18+; Urgent care available to members and dependents ages 2+	 Cough, cold and flu Urgent care needs Illness while traveling Therapy Psychiatry, lactation and nutrition services Medication questions Insurance or coverage questions 	
24-Hour Nurse Advice Line		
Call 800-535-9700 for general questions about health issues or where to go for care	Cough, cold and fluRashesMedication questions	✓
PCP Visit		
Discuss diagnosis, treatment of illness, chronic conditions, routine check-ups	Routine physicalDiabetic careCough, cold, flu, allergiesBronchitis	✓
Convenience Care Centers		
(e.g., CVS MinuteClinic) Health screenings, vaccinations, minor illness or injury	Cough and coldPink eyeEar painFlu shot	×
Urgent Care Centers		
Non-life-threatening illness or injury requiring immediate care	SprainsCut requiring stitchesMinor burnsSore throat	×
Emergency Room Visit		
Life-threatening illness or injury	Chest painDifficulty breathingUncontrolled bleedingMajor burns	×

CloseKnit is a registered trademark owned by, and is the trade name of, Atlas Health, LLC. Atlas Health, LLC d/b/a CloseKnit provides telehealth services to CareFirst BlueCross BlueShield members.

PLEASE READ: The information provided in this document regarding various care options is meant to be helpful when seeking care and is not intended as medical advice. Only a medical provider can offer medical advice. The choice of provider or place to seek medical treatment belongs entirely to you.

CareFirst WellBeing

Live your healthiest life with CareFirst WellBeingsM. Access motivating digital resources anytime, plus specialized programs for extra support—at no cost to you—including:

- **RealAge**®: Discover if your healthy habits are making an impact by taking the RealAge health assessment.
- Health coaching: Get one-on-one confidential support from trained professionals to achieve your best health.
- Lifestyle coaching: Identify opportunities to improve your daily health, from managing stress to eating healthy and being active.
- Disease management: Get help to better understand and manage your chronic or complex condition.
- **Tobacco cessation**: Learn how to recognize and avoid tobacco cravings and habits with our voluntary and confidential 21-day program, Craving to Quit.
- Financial well-being: Whether you want to stop living paycheck to paycheck, get out of debt, or send a child to college, our financial well-being program, SmartDollar, can help.



- Weight management programs:¹ Reach a healthier weight and reduce the risk of developing type 2 diabetes with the following programs:
 - Noom weight management: Gain confidence to make lasting change with this award-winning weight loss program designed by psychologists.
 - Noom diabetes prevention program (DPP): Access tracking tools, peer support and specially trained coaches to help lower the risk of diabetes.
 - **Eat Right Now**: Change your eating patterns with this 12-month program that combines neuroscience and mindfulness tools.
- Inspirations: Break free from stress, unwind at the end of the day or ease into a restful night of sleep with meditation, streaming music and videos

Exciting, personalized programs—from physical fitness and family relationships to stress management and financial health—can help you, and your family, address every aspect of your well-being.



¹ To join Noom or Eat Right Now, members need to meet clinical eligibility criteria through an online assessment. Noom is an app-based program. Eat Right Now is app-based and available on the web. Eat Right Now is administered by Sharecare, Inc. and Noom is administered by Noom, Inc., independent companies that provide health improvement management services to CareFirst members. Sharecare, Inc. and Noom do not provide CareFirst BlueCross BlueShield products or services and are solely responsible for the health improvement management services they provide.

Find a doctor

CareFirst has one of the world's largest networks of participating providers—over one million in all. Whether you're looking for a primary care physician, a specialist or a care facility, we can help you find one that's right for you. Our simple Find-a-Doctor tool helps you select the right healthcare at the right place.

Try it for yourself. Visit **carefirst.com/doctor**. You'll be able to search by name, location, specialty and a host of other options. You can even find participating doctors and facilities outside of the U.S.

My Account benefits

Your member portal is personalized to you and your CareFirst benefits. Stay on top of your health with easy access to everything you need to understand your coverage, find care at the best price, and track your claims and deductibles at your fingertips. With My Account, you can:

- Find in-network doctors, urgent care centers and other care—nationwide
- View, order or email member ID cards
- Check claims and deductible status
- Update communication preferences and password
- Quickly access a variety of CareFirst member programs
- Send a secure message for members

Treatment Cost Estimator

Our Treatment Cost Estimator shows you what you'll pay for procedures, doctor's office visits, lab tests and surgery beforehand, so you can plan ahead and avoid surprises.



- Receive personalized estimates based on your plan
- Compare costs from different doctors and facilities

Away From Home Care®—Regional plan

When you're away from home for 90 consecutive days or more, we've got you covered with our Away From Home Care program.

- You can see any affiliated Blue Cross Blue Shield HMO (Host HMO) provider when you are outside the CareFirst service area.
- You'll be considered a member of the Host HMO and receive care under their plan. Your cost may be different than when you're in the CareFirst service area.
- Once you're enrolled in the program and receive care, you don't have to complete claim forms, so there's no paperwork. And you're only responsible for out-of-pocket costs such as copays, deductibles, coinsurance and the cost of non-covered services.

Whether you're out-of-town on extended business, traveling or going to school out-of-state, you have access to routine and urgent care.

BlueCard and Blue Cross Blue Shield Global® Core—National plan

With your Blue Cross and Blue Shield member ID card, you have access to doctors and hospitals almost anywhere. BlueCard gives you the peace of mind that you'll always have the care you need when you're away from home. And with Blue Cross Blue Shield Global® Core (BCBS Global® Core), you have access to care in more than 190 countries.

BlueCard

- You'll have access to local Blue Cross Blue Shield Plan doctors and hospitals when you're outside the CareFirst service area.
- You'll be considered a member of the local BCBS plan when you receive care. Your cost may be different than when you're in the CareFirst service area.
- For care received in-network, you don't have to complete claim forms, so there's no paperwork.

BCBS Global® Core

- In most cases, you shouldn't have to pay up front for inpatient care at hospitals in the BCBS Global Core Network.
- At hospitals outside the BCBS Global Core Network, you pay the doctor or hospital for inpatient care, outpatient hospital care and other medical services. You then complete an international claim form for reimbursement.

Blue Rewards incentive program

As part of your CareFirst WellBeingsM program, Blue Rewards adds an incentive to your efforts to better your health. By completing a few healthy activities, you and your spouse/domestic partner can earn rewards as you continue to put your own care first. Each activity comes with its own reward.



Earn \$50 Consent to receive wellness emails and take the RealAge®

RealAge is a simple assessment that will help you determine the physical age of your body compared to your calendar age.

Must complete within 180 days of your effective date.

assessment



Earn \$100

Select a primary care provider (PCP) and complete a health screening

You can visit your PCP or a CVS MinuteClinic® to complete your screening.

Must complete within 180 days of your effective date.



Earn \$25 Retake the RealAge assessment

You can earn an additional reward for retaking it after 90 days.

RealAge answers must be updated or confirmed no earlier than 90 days after the original assessment, and before the end of the benefit period.



Earn up to \$200 Participate in health coaching

Session 1 = \$30 Session 2 = \$70 Session 3 = \$100

Sessions must be held 2–60 days apart and must be completed before end of your benefit period.

Once you've completed one or more of the activities, you'll receive a CareFirst Blue Rewards Visa® Debit Card with your rewards on it. This card can be used toward your annual deductible, out-of-pocket costs or other eligible expenses under your plan¹. Keep the card for as long as you're a member and future incentives will be added to your balance as you earn them.



Visit **carefirst.com/wellbeing** or download CareFirst WellBeing from your app store to get started.

¹ Members funding a high-deductible medical plan must reach their IRS minimum deductible before they can use their Blue Rewards debit card. If these members have CareFirst vision or dental benefits, they can certify to only use the card for eligible vision/dental expenses prior to meeting their deductible.

Mental and behavioral health support

As a CareFirst member, you have 24/7 access to a range of programs for depression, anxiety, drug or alcohol dependencies and other mental health conditions, including:

- **CloseKnit**—access our leading virtual care practice through a simple, convenient app. CloseKnit providers can assess behavioral health needs to help you connect with therapists and psychiatrists.
- **Behavioral Health Digital Resource**—chat with trained volunteer listeners, pursue personalized growth paths, engage with CareFirst care managers, and access other tools via this online platform.
- **Substance Use Support**—get clinical counseling 24/7, or schedule substance use disorder treatment for you or a loved one within 48 hours.
- Care Navigation—talk to a Behavioral Health Care Manager who can help you find a path forward. LGBTQ+ members can contact our dedicated services specialist for help navigating care and understanding benefits.

To learn more about all the free mental and behavioral support available, visit carefirst.com/mentalhealth.

You're never alone. If you or someone you know is in crisis, call or text 988 or contact the CareFirst support line at 800-245-7013.





"We all struggle at times, so knowing there are so many options my teens can turn to for help is a huge relief."

Cost comparison worksheet

Use this worksheet to compare plans or to compare this year's plan to your old plan.

Annual costs to consider	Plan 1	Plan 2	
For each row, fill in the amounts from the benefit summary included in this guide, along with your company's health insurance paycheck deduction for each plan.			
Annual paycheck deduction	\$ per month	\$ per month	
	x 12 months =	x 12 months =	
	\$	\$	
Annual in-network deductible	\$Individual	\$ Individual	
	\$ Family	\$ Family	
Are any services covered before the deductible is met?	○ Yes ○ No	○ Yes ○ No	
Annual out-of-pocket maximum	\$ Individual	\$ Individual	
	\$ Family	\$ Family	

Costs when using your plan	Plan 1	Plan 2	
For each row, estimate how many visits you and your family generally expect to have each year along with the amounts for each service included in this guide.			
About how many times did you visit your primary care doctor (outside of annual wellness visits/physical) in the	\$ per visit	\$ per visit	
	x visits per year =	x visits per year =	
past year?	\$	\$	
	\$ per visit	\$ per visit	
About how many times did you visit specialists in the past year?	x visits per year =	x visits per year =	
	\$	\$	
In the past year, how many times did you go to urgent care?	\$ per visit	\$ per visit	
	x visits per year =	x visits per year =	
	\$	\$	
In the past year, how many times did you go to the emergency room?	\$ per visit	\$ per visit	
	x visits per year =	x visits per year =	
	\$	\$	
Is there anything coming up in the next 12-18 months that you didn't have to plan for last year?	○ Yes ○ No	○ Yes ○ No	
	\$ per visit	\$ per visit	
If Yes, use this line to estimate the cost for that procedure	x visits per year =	x visits per year =	
	\$	\$	
TOTALS	\$	\$	

Next steps

Ready to enroll?

- Log in to PeopleSoft to make your elections at ess.dc.gov
- Complete the enrollment process
- Look for your member ID cards in the mail and download the CareFirst mobile app to access your plan on-the-go

Not ready to choose your plan just yet?

- If you need more detailed plan information, visit https://dchr.dc.gov/page/ openenrollment-2024
- Set a reminder on your phone so you don't miss the deadline

DECEMBER



Don't worry you have until December 9, 2024 to make or change your plan selection.



We're here to help! If you have additional questions, please call **833-556-3163**, Monday-Friday, 8 a.m. to 9 p.m.



"Everything in this guide is designed to help you and your family achieve your best health. And all the plans, programs, tools and resources that we've built for you are exactly what we expect for ourselves and those we love. Because, like you, we're CareFirst members, too."

Tonya O.

Notes

Defending Access to Women's Health Care Services Revision Act of 2018

The services set forth below mirrors preventive services under the Patient Protection and Affordable Care Act. These preventive services and contraceptive services are covered when clinically appropriate, under recommendations of the United States Preventive Services Task Force and supporting evidence. Services apply to D.C. plans that have elected or are required to provide these preventive services. Limitations may apply with respect to the availability, setting, frequency, or method of a

These preventive services are offered at no cost to you. This means you don't have to pay a copay or coinsurance, even if you haven't met your deductible. Subscribers are still responsible for their portion of the premiums

Well child visits (to age 21) to include:

- Alcohol and drug assessments for older children
- Autism screening
- Cardiac arrest risk assessment
- Certain diagnostic screenings for newborns
- Cervical dysplasia for sexually active females
- Counseling for certain sexually transmitted diseases for those at increased risk
- Depression screening
- Developmental screenings—under age 3
- Fluoride varnish
- Health, diet and weight counseling
- Hearing screening for newborns
- Hematocrit or hemoglobin screening
- Hepatitis B infection assessment
- HIV screening
- Lead testing
- Obesity screening
- Suicide risk assessment
- Tobacco use screening and cessation counseling
- Vision screening

Immunizations for children include:

- COVID-19
- Diphtheria, Tetanus, Pertussis
- Hepatitis A and Hepatitis B
- Human Papillomavirus (HPV)
- Inactivated Polio
- Influenza
- Influenza B
- Measles, mumps and rubella
- Meningococcal
- Pneumococcal
- Rotavirus
- Varicella

Preventive care visits include:

- Abdominal aortic aneurysm (one-time) screening
- Alcohol misuse screening
- Anemia screening
- Breast cancer (mammogram)
- BRCA testing for breast/ovarian cancer risk and genetic
- Breastfeeding support, supplies and counseling
- Cervical cancer screening
- Cholesterol screening
- Colon Cancer Screenings
- Contraceptive care and counseling including alternative methods
- Depression screening
- Fall Prevention Physical therapy and Vitamin D (OTC*) supplementation to prevent falls in community-dwelling adults (those who are not in assisted living facilities or nursing homes), age 65 years or older who are at increased

- FDA-approved contraceptives and counseling
- Generic Truvada (emtricitabine/tenofovir disoproxil fumarate) (brand name (P) only when generic equivalent drug is medically inappropriate, as determined by the individual's health care provider) including medication monitoring, preventive counseling or office visits which may include the following services:
 - Adherence counseling
 - Creatinine testing
 - HIV, Hepatitis B and Hepatitis C screenings
 - Pregnancy testing
 - STI screening and counseling
- Gestational diabetes screening
- Health, diet and weight counseling for qualifying adults
- Hepatitis B and Hepatitis C screening
- High blood pressure screening
- HIV screening
- HPV DNA testing
- Intimate partner, interpersonal and domestic violence screening and counseling
- Lung cancer screening
- Obesity screening
- Osteoporosis screening
- Rh incompatibility and urinary tract infection screenings for pregnant women
- Sexually transmitted diseases
- Tuberculosis screening
- Type 2 diabetes screening
- Tobacco use screening and cessation counseling

FDA-approved contraceptives:

- Cervical cap (P) with spermicide (OTC*)
- Contraceptive implant system (inserted by doctor)
- Contraceptive patch (P)
- Contraceptive ring (P)
- Diaphragm (P) with spermicide (OTC*)
- Female condom (OTC*)
- Fertility Mobile Apps**
- IUD (inserted by doctor)
- Morning after pill (generic only) (OTC*)
- Oral contraceptive (brand name (P) only when generic equivalent drug is medically inappropriate, as determined by the individual's healthcare provider). Preauthorization and medical review of brand name oral contraceptives is required.
- Oral contraceptive (generics) (P)
- Shot/injection1 (generic only) (P)
- Spermicide (OTC*)
- Sponge (OTC*) with spermicide (OTC*)
- Sterilization implant
- Sterilization surgery

Immunizations for adults:

- COVID-19
- Hepatitis A and B
- Herpes Zoster

Information on preventive services are available at healthcare.gov/coverage/preventive-care-benefits

To verify your benefits, check your benefits contract, your enrollment materials or log into My Account at carefirst.com/myaccount.

*Requires a prescription from a physician, or a D.C., Board certified, network pharmacists for contraceptives. Prescriptions must be filled at a network pharmacy to obtain the zero-cost share. You may be able to receive up to a 12-month supply of contraceptives at one time. Ask your physician or pharmacist if you have any questions regarding dispensing amount.

**Cannot submit to both HSA and FSA for reimbursement

Includes brand name Depo-SubQ Provera 104 (injection)

(IN) Proception Proprietion P

(P) Prescription Required; (OTC) Over the Counter

- Influenza
- Measles, mumps and rubella
- Diphtheria, Tetanus, Pertussis
- Meningococcal
- Pneumococcal
- Varicella

Breastfeeding supplies (provided under the Durable Medical Equipment (DME) benefits of the contract)

Coverage is provided for:

- Electric breast pump (rental and/or purchase)
- Hospital grade electric breast pump (rental)
- Manual breast pumps (rental and/or purchase)

Replacement supplies include:

- Adapter for breast pump
- Breast pump replacement tubing
- Breast shield and splash protector for use with breast pump
- Cap for breast pump bottle
- Locking ring for breast pump
- Polycarbonate bottle for use with breast pump

Prenatal care:

Routine prenatal obstetrical office visits

- Lactation consultations which may include comprehensive breastfeeding education, support, counseling, clinical management and interventions provided to women during the antenatal, perinatal, and postpartum period to support the initiation, maintenance and continuation of breastfeeding, including when provided to women who encounter difficulties breastfeeding due to anatomic variations, complications, and feeding problems with newborns.
- Perinatal depression screening and counseling

Breast cancer drugs:

 Tamoxifen, Raloxifene, Exemestane and Anastrozole forwomen 35 and older at an increased risk for invasive breast cancer. Preauthorization required

Preventive drugs for adults:

- Aspirin (81mg) (OTC*)
- Colon Preparations-age 50-74 (P)
- Folic Acid—women of childbearing age (P)
- Smoking Cessation (OTC*)
- Vitamin D (600IU–800IU)—age 65 years and older (P)
- Statins (generic low to moderate intensity) adults age 40 to 75 (P)
- Generic antiretroviral therapy (Rx): Emtricitabine/tenofovir disoproxil fumarate 200 mg-300 mg

Preventive drugs for children:

- Fluoride—starting at 6 months (P)
- Iron—6–12 mo. risk of anemia (OTC*)



CONNECT WITH US:









The examples provided in this booklet are meant to help you evaluate the benefits we offer. They are not meant to convey the exact terms of any one particular plan and do not create rights not given through the benefit plan. The details of your plan may vary.

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