

Federal health reform has guaranteed that basic health care services for women are now covered at 100 percent by your health care benefits plan. These services help prevent disease or help women deliver healthy babies. You do not need to pay any deductible, copay or coinsurance for these services **if you go to an in-network doctor or health care facility**.

## These services include:

- ✓ Well-woman visits
- ✓ Mammograms (digital and film for all adult women)
- ✓ Diabetes screening
- ✓ Cervical cancer screening (including PAP smears)
- ✓ Genetic counseling and evaluation for BRCA breast cancer gene (lab testing is not included)
- Counseling for cancer prevention strategies for women at high risk for breast cancer
- Screening and counseling for sexually transmitted infections, including gonorrhea, chlamydia and syphilis

- Human immune-deficiency virus (HIV) screening and counseling for sexually active women
- Counseling and payment for FDA-approved contraceptives including sterilization
- Osteoporosis screening for certain populations
- ✓ Counseling to stop smoking
- √ Vaccinations
- ✓ Screening and counseling for domestic violence



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## REMEMBER: USE AN IN-NETWORK PROVIDER

These services must be given by an in-network health care provider in order to recieve the benefit. You can find one by visiting umr.com and select Find a provider. You can also call the toll-free number on the back of your ID card.

## Pregnant women also receive full coverage for:

- ✓ Pre-conception counseling and routine, prenatal care
- ✓ Screening for gestational diabetes, iron-deficiency anemia, bacteria in urine, Hepatitis B virus, Rh incompatibility
- ✓ Breastfeeding support, supplies and counseling

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In general, coverage for these services begins when your new plan year starts.

Refer to your summary plan description (SPD) for the effective date for your plan.

