

CEBT's Covered Preventative Services for Children



Eligible charges for the routine items below will be covered at 100% through an in network provider. Through an out of network provider charges are subject to the plan deductible and coinsurance.

General Screening Guidelines	General Screening Guidelines
Alcohol & Drug Use - assessments	Autism - screening at 18 & 24 months
Behavioral - assessments	Blood Pressure Screening
Cervical Dysplasia Screening	Congenital Hypothyroidism - screening newborns
Developmental - screening under age 3	Dyslipidemia Screening
Fluoride Chemoprevention Supplements	Gonorrhea Prevention Medication- newborns
Hearing Screening - newborns	Height, Weight & Body Mass Index - measurements
Hematocrit or Hemoglobin Screening	Hemoglobinopathies or Sickle Cell Screening
Hepatitis B Screening	HIV Screening
Hypothyroidism Screening	Immunization Vaccines - birth to age 18
Iron Supplements	Lead Screening
Medical History	Obesity Screening and Counseling
Oral Health - risk assessment	Phenylketonuria (PKU) Screening
Sexually Transmitted Infection (STI) - prevention counseling	Tuberculin Testing
Routine Vision Exam	
General Immunization / Vaccine	General Immunization / Vaccine
Diphtheria, Tetanus, Pertussis	Haemophilus Influenza Type B
Hepatitis A & B	Human Papillomavirus (HPV)
Inactivated Poliovirus	Influenza - flu shots
Measles	Meningococcal
Pneumococcal (pneumonia)	Rotavirus
Varicella (chicken pox)	