

SHARP Health Plan

Women (18 years and older)¹

Preventive Care Checklist

Discuss your checklist with your doctor to develop your own personalized preventive care plan. Your doctor will help you determine which tests and health screenings are best for you based on your age, gender, health status and family history.

Exams		
Periodic Well Visit with Your PCP (schedule at least 2 months in advance) and/or a Yearly Well Woman Preventive Visit with PCP/OB-GYN ²	18 and older	<input type="radio"/>
Vaccines		
COVID-19 [*]	18 and older	<input type="radio"/>
Flu Shot (every fall)	18 and older	<input type="radio"/>
Human Papillomavirus (HPV) ^{2,3}	26 and younger	<input type="radio"/>
Pneumonia (Pneumovax followed by Pnevmar 20)	19 – 64 ² 65 and older	<input type="radio"/>
Tetanus, Diphtheria, Pertussis (Td/Tdap every 10 years)	18 and older	<input type="radio"/>
Hepatitis B	19 – 59 ⁶	<input type="radio"/>
RSV	Reach out to your doctor for details	<input type="radio"/>
Shingles (Shingrix)	50 and older ⁷	<input type="radio"/>
Screenings		
Blood Pressure	18 and older ²	<input type="radio"/>
Blood Sugar (Diabetes) ²	18 and older	<input type="radio"/>
Body Mass Index (BMI)	18 and older	<input type="radio"/>
Breast Cancer (Mammogram) ²	40 – 74	<input type="radio"/>
Cardiac Arrest	18 – 21	<input type="radio"/>
Cervical Cancer (Pap Smear, HPV Testing)	21 – 65	<input type="radio"/>
Sexually Transmitted Disease (Chlamydia, Gonorrhea, Syphilis) ²	18 and older	<input type="radio"/>
Cholesterol	18 and older ²	<input type="radio"/>
Colon Cancer (Colonoscopy, Sigmoidoscopy, Stool Test)	45 – 75	<input type="radio"/>
Depression and Suicide Risk	18+, pregnant and postpartum women	<input type="radio"/>
Healthy Weight Counseling ⁸	Women 40 – 60 with a BMI range of 18.5 – 29.9 kg/m ²	<input type="radio"/>
Hepatitis B	18+ ² and pregnant women	<input type="radio"/>
Hepatitis C	18 – 79 ⁴	<input type="radio"/>
HIV ²	18 – 65	<input type="radio"/>
Intimate Partner Violence	18 and older	<input type="radio"/>
Osteoporosis ²	65+, under 64 ²	<input type="radio"/>
Lung Cancer ⁵	50 – 80	<input type="radio"/>
Tobacco, Drug and Alcohol Use Screening	18 and older	<input type="radio"/>
Tuberculosis ²	18 and older	<input type="radio"/>

^{*} Some COVID-19 vaccines are authorized under EUA (emergency use authorization). ¹ The information in these checklists includes recommendations adapted from the following sources as of November 2023 and is subject to change: Preventive services with a rating of A or B from the U.S. Preventive Services Task Force; immunization for children, adolescents and adults recommended by the Centers for Disease Control and Prevention; and preventive care screenings for infants, children, adolescents and women supported by the Health Resources and Services Administration. Also check the age-related preventive health checklist. Other immunizations may be recommended by your provider depending on vaccine and indication. ² Based on risk factors, and as advised by your doctor. ³ For ages 27 – 45, shared clinical decision-making between member and PCP. ⁴ One-time screening. ⁵ With a 20-pack-a-year smoking history and currently smoke or have quit within the past 15 years. ⁶ Recommended for women 60 years and older if they have additional risk factors. ⁷ 19 and older if immunodeficient or immunosuppressed because of disease or therapy. ⁸ If not given in childhood. ⁹ Based on HRSA/WPSI effective 1/1/2023. ¹⁰ Gestational age 32 – 36 weeks.

SHARP Health Plan

Men (18 years and older)¹

Preventive Care Checklist

Discuss your checklist with your doctor to develop your own personalized preventive care plan. Your doctor will help you determine which tests and health screenings are best for you based on your age, gender, health status and family history.

Exams		
Periodic Well Visit with Your PCP (schedule at least 2 months in advance)	18 and older	<input type="radio"/>
Vaccines		
COVID-19* (Series and Booster)	18 and older	<input type="radio"/>
Flu Shot (every fall)	18 and older	<input type="radio"/>
Hepatitis B	19 – 59 ⁶	<input type="radio"/>
Human Papillomavirus (HPV) ^{2,3}	26 and younger	<input type="radio"/>
Measles, Mumps and Rubella (MMR)	18 and older ⁸	<input type="radio"/>
Pneumonia (Pneumovax followed by Prevnar 20)	19 – 64 ² 65 and older	<input type="radio"/>
RSV	Reach out to your doctor for details	<input type="radio"/>
Shingles (Shingrix)	50 and older ⁷	<input type="radio"/>
Tetanus, Diphtheria, Pertussis (Td/Tdap every 10 years)	18 and older	<input type="radio"/>
Screenings		
Abdominal Aorta Aneurysm ^{2,4}	65 – 75	<input type="radio"/>
Anxiety	18 – 64	<input type="radio"/>
Blood Pressure	18 and older ²	<input type="radio"/>
Blood Sugar (Diabetes) ²	18 and older	<input type="radio"/>
Body Mass Index (BMI)	18 and older	<input type="radio"/>
Cardiac Arrest	18 – 21	<input type="radio"/>
Cholesterol	18 and older ²	<input type="radio"/>
Colon Cancer (Colonoscopy, Sigmoidoscopy, Stool Test)	45 – 75	<input type="radio"/>
Depression	18 and older	<input type="radio"/>
Hepatitis B	18 and older ²	<input type="radio"/>
Hepatitis C	18 – 79 ⁴	<input type="radio"/>
HIV ²	18 – 65	<input type="radio"/>
Lung Cancer ⁵	50 – 80	<input type="radio"/>
Tobacco, Drug and Alcohol Use Screening	18 and older	<input type="radio"/>
Tuberculosis ²	18 and older	<input type="radio"/>

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SHARP Health Plan

Children (birth to 10 years)¹

Preventive Care Checklist

Discuss your checklist with your doctor to develop your own personalized preventive care plan. Your doctor will help you determine which tests and health screenings are best for you based on your age, gender, health status and family history.

Well Child Exams and Vaccines ²		
COVID-19* (Series and Booster)	6 months and older	<input type="radio"/>
Exam and Hepatitis B	Birth – first outpatient visit	<input type="radio"/>
Exam	1 month	<input type="radio"/>
RSV (RSV-mAB (Nirsevimab))	Infants younger than 9 months ²	<input type="radio"/>
Exam, DTaP-Hib (3 or 4 doses)-IPV, PCV-15 or 20 (4 doses), Hepatitis B (1 – 2mos), Rotavirus (2 – 3 doses)	2 months	<input type="radio"/>
Exam, DTaP-Hib-IPV, PCV-15 or 20, Rotavirus	4 months	<input type="radio"/>
Exam, DTaP-Hib-IPV (6 – 18 mos), PCV-15 or 20, Hepatitis B (6 – 18 mos), Flu Shot, Rotavirus	6 months	<input type="radio"/>
Exam	9 months	<input type="radio"/>
Exam, Anemia Test, Possible TB and Lead Tests, MMR (12 – 18 mos), Varicella (12 – 15 mos), Hepatitis A	12 months	<input type="radio"/>
Exam, DTaP (15 – 18 mos)-Hib (12 – 15 mos), PCV-15 or 20 (12 – 15 mos)	15 months	<input type="radio"/>
Exam, Flu Shot, Hepatitis A (12 – 23 mos, 2 doses) ³	18 months	<input type="radio"/>
Exam and Hepatitis A ³	24 months	<input type="radio"/>
Exam and Flu Shot	3 years	<input type="radio"/>
Exam, Flu Shot, DTaP (4 – 6y), Polio (4 – 6y), MMR (4 – 6y) and Varicella (4 – 6y)	4 years	<input type="radio"/>
Exam and Flu Shot	5 years	<input type="radio"/>
Exam and Flu Shot (exams every 1 – 2 years, flu shot annually)	6 – 10 years	<input type="radio"/>
PCV 15 or 20 with any risk condition who have not received PCV 13,15 or 20	6-18 years	<input type="radio"/>
Human Papillomavirus (HPV) ⁴	9 – 12 years	<input type="radio"/>
Tdap	11 – 12 years	<input type="radio"/>
Screenings		
Anxiety	8 – 10	<input type="radio"/>
Body Mass Index (BMI)	2 years and older	<input type="radio"/>
Dental Caries	Birth – 5 years	<input type="radio"/>
Hepatitis B	Birth – 10 years	<input type="radio"/>
Obesity	6 years and older	<input type="radio"/>
Skin Cancer Behavioral Counseling	6 months – 10 years (with fair skin)	<input type="radio"/>
Vision	3 – 5 years (at least once)	<input type="radio"/>

Key: DTaP (Diphtheria, Tetanus, Pertussis), Hib (Haemophilus Influenzae Type b), MMR (Measles, Mumps and Rubella), Pentacel (DTaP, Polio, Hib), Prevnar (Pneumococcal Conjugate), TB (Tuberculosis), Varicella (Chickenpox)

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We're here to help! | 1-800-359-2002 | sharphealthplan.com

SHARP Health Plan

Adolescents (11 to 17 years)¹

Preventive Care Checklist

Discuss your checklist with your doctor to develop your own personalized preventive care plan. Your doctor will help you determine which tests and health screenings are best for you based on your age, gender, health status and family history.

Exams		
Yearly Well Visit with Your Adolescent's Doctor (schedule at least 2 months in advance)	11 – 17	<input type="radio"/>
Vaccines ²		
COVID-19* (Series and Booster)	11 and older	<input type="radio"/>
Flu Shot (every fall)	11 and older	<input type="radio"/>
Human Papillomavirus (HPV) ⁴	9 – 12	<input type="radio"/>
Meningococcal B ⁵	16 – 17	<input type="radio"/>
Meningococcal Conjugate (MCV4) ^{4,5,6}	11 – 12 and 16	<input type="radio"/>
RSV	Pregnant women ⁷	<input type="radio"/>
Tetanus, Diphtheria, Pertussis (Tdap)	11 – 12 and pregnant adolescents at 27-36 weeks	<input type="radio"/>
Screenings		
Anxiety	11 and older	<input type="radio"/>
Body Mass Index (BMI)	11 and older	<input type="radio"/>
Cardiac Arrest	11 and older	<input type="radio"/>
Depression and Suicide Risk	12 and older	<input type="radio"/>
Hepatitis B	11 and older	<input type="radio"/>
HIV ⁵	15 and older	<input type="radio"/>
Obesity	11 and older	<input type="radio"/>
Sexually Transmitted Infections (STIs) ⁸	Sexually active adolescents who are at increased risk for STIs	<input type="radio"/>
Skin Cancer	11 and older	<input type="radio"/>
Tobacco, Drug and Alcohol Use Counseling	11 and older	<input type="radio"/>

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SHARP Health Plan

Diabetes & hypertension (18 years and older)¹

Preventive Care Checklist

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Exams		
Periodic Well Visit with Your PCP (schedule at least 2 months in advance)	18 and older	<input type="radio"/>
Medication Review (with an RN, pharmacist or your PCP)	18 and older	<input type="radio"/>
Vaccines		
COVID-19* (Series and Booster)	18 and older	<input type="radio"/>
Flu Shot (every fall)	18 and older	<input type="radio"/>
Pneumonia (Pneumovax 23 followed by Pneumovax or Prevnar 20)	19 – 64 ² 65 and older	<input type="radio"/>
Screenings		
Blood Pressure	18 and older	<input type="radio"/>
Blood Sugar (HbA1c; Diabetes) ²	18 and older	<input type="radio"/>
Body Mass Index (BMI)	18 and older	<input type="radio"/>
Cholesterol ²	20 and older	<input type="radio"/>
Depression and Suicide Risk	18 and older	<input type="radio"/>
Dilated Eye Exam (Diabetes) ²	18 and older	<input type="radio"/>
Kidney Function (Diabetes) ²	18 and older	<input type="radio"/>
Tobacco, Drug and Alcohol Use Screening	18 and older	<input type="radio"/>
Visual Foot Inspection (Diabetes)	18 and older	<input type="radio"/>
Program Referral		
Disease Management Program ²	18 and older	<input type="radio"/>
Health Coaching Program ²	18 and older	<input type="radio"/>

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