

2022 HEP REQUIREMENTS

MORE INFO: WWW.CTHEP.COM | (877) 687-1448

| PREVENTIVE SCREENINGS | AGE | | | | | | |
|---------------------------------------|------------|---------------------|---------------------|---------------------|---|---|---|
| | 0-5 | 6-17 | 18-24 | 25-29 | 30-39 | 40-49 | 50+ |
| Preventive Visit | 1 per year | 1 every other year | Every 3 years | Every 3 years | Every 3 years | Every 2 years | Every year |
| Vision Exam | N/A | N/A | Every 7 years | Every 7 years | Every 7 years | Every 4 years | 50-64: Every 3 years 65+: Every 2 years |
| Dental Cleanings* | N/A | At least 1 per year | At least 1 per year | At least 1 per year | At least 1 per year | At least 1 per year | At least 1 per year |
| Cholesterol Screening | N/A | N/A | Every 5 years (20+) | Every 5 years | Every 5 years | Every 5 years | Every 5 years |
| Breast Cancer Screening (Mammogram) | N/A | N/A | N/A | N/A | N/A | 1 screening between age 45-49** | As recommended by physician |
| Cervical Cancer Screening (Pap Smear) | N/A | N/A | Every 3 years (21+) | Every 3 years | Pap smear only every 3 years or Pap and HPV combo screening every 5 years | Pap smear only every 3 years or Pap and HPV combo screening every 5 years | Pap smear only every 3 years or Pap and HPV combo screening every 5 years to age 65 |
| Colorectal Cancer Screening† | N/A | N/A | N/A | N/A | N/A | 40-44: N/A 45+: Colonoscopy every 10 years, Annual FIT/FOBT to age 75 or Cologuard screening every 3 years | |

* Dental cleanings are required for family members who are participating in a dental plan sponsored by your employer

** Or as recommended by your physician

† NEW: colorectal screening age requirements lowered to 45 years of age for calendar year 2022 as recommended by US Task Force on Preventive Services

For those with a chronic condition: The household must meet all preventive and chronic requirements to be compliant.