

## Covered Diabetes Services

Service	Conditions Needed to Qualify (One or More)	How Often Covered
<b>Diabetes Screening</b> <i>Free to You</i>	BMI > 30 High blood pressure High cholesterol High sugars If you have 2 of the following: <ul style="list-style-type: none"> <li>• Age at least 65 years</li> <li>• Birth of a child weighing &gt; 9 lb</li> <li>• BMI 25–30</li> <li>• Family history for diabetes</li> <li>• Gestational diabetes</li> </ul>	Twice annually
<b>Diabetes Self-Training</b> <i>You pay 20% per visit.</i>	Diabetes	Annually <ul style="list-style-type: none"> <li>• Up to 10 hours the first year</li> <li>• Up to 2 hours per year in later years</li> </ul>
<b>Medical Nutrition Therapy</b> <i>Free to You</i>	Diabetes Kidney disease Kidney transplant within last 36 months	Annually <ul style="list-style-type: none"> <li>• Includes initial and follow-up visits with a registered dietician or nutritionist</li> </ul>