## **Free Preventive Services for Infectious Diseases**

\*If your healthcare provider "accepts assignment"

Service	Conditions Needed to Qualify (One or More)	How Often Covered
COVID-19 Screening	Anyone who has a suspected exposure or who has symptoms	During COVID-19 pandemic
COVID-19 Vaccination	Everyone is eligible for initial series Booster shots for anyone 65 and older or anyone 18 and older with risk factors	During COVID-19 pandemic
Hepatitis B Vaccination	<ul> <li>Diabetes</li> <li>End stage renal disease</li> <li>Healthcare workers</li> <li>Hemophilia</li> <li>Past blood transfusions</li> </ul>	One vaccination series
Hepatitis C Screening	<ul> <li>Blood transfusion before 1992</li> <li>Born between 1945 and 1965</li> <li>History of injected illicit drug use</li> </ul>	One-time screening for everyone  Annual screening for anyone who continues to use injectable illicit drugs
HIV Screening	<ul><li> "At high risk"</li><li> Pregnant</li><li> You request the test</li></ul>	Annually  Multiple times during pregnancy
Influenza (flu) vaccine	Everyone	Once every flu season
Pneumonia vaccine	Everyone (Two different pneumococcal shots)	One-time for each shot, at least one-year apart
Sexually Treated Infection Screening and/or Counseling	"At high risk"	Annually