**Section 140.486 Illinois Healthy Women**

a) Benefit coverage under Illinois Healthy Women is available to women meeting the eligibility requirements set forth in 89 Ill. Adm. Code 120.540.

b) Covered medical services under Illinois Healthy Women are limited to the following reproductive health and family planning services:

1) Physical examination and health history for family planning purposes;

2) Brief and intermediate follow-up office visits related to family planning;

3) Pap smears, at least annually, or as medically indicated;

4) Necessary family planning or women’s health related lab and diagnostic tests;

5) Birth control drugs and devices, including the inserting, implanting or injecting of a birth control drug and removing of a birth control device;

6) Sterilization services, pursuant to Section 140.483;

7) Testing and treatment for sexually transmitted infections (STIs) diagnosed during a family planning visit;

8) Testing for HIV, when ordered by a physician during a family planning visit;

9) Generic prenatal vitamins, or generic multi-vitamins with folic acid, or folic acid; and

10) Mammograms, when ordered by a physician during a family planning visit.

c) Payment of services under this Section shall be made to participating providers in accordance with this Part.

(Source: Old Section repealed at 15 Ill. Reg. 298, effective December 28, 1990; new Section added at 28 Ill. Reg. 11161, effective August 1, 2004)