

## Final Interim Rules for Coverage of Preventive Health Services without Cost-Sharing

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The Departments of Health and Human Services, Labor and the Treasury jointly released interim final regulations related to coverage of **preventive services** under the Patient Protection and Affordable Care Act (PPACA).

**Under the regulations, plans must cover without copay, coinsurance or deductible certain preventive services that have strong scientific evidence of their health benefits.**

These are interim final regulations which means final rules may differ once final guidance is released from the Secretary on this provision. As additional clarification is made available, we will share that information with you.

### General Highlights of New Regulations:

- ★ These regulations apply to group health plans (including self-insured plans) and health insurance coverage issued in the group and individual markets.
- ★ Grandfathered plans are exempt for as long as they remain grandfathered.
- ★ Non-grandfathered plans (i.e., plans either not in effect on 3/23/10 or that made changes since then resulting in loss of grandfathered status) must comply with the no-cost-sharing requirement beginning with the first plan year on or after September 23, 2010.
- ★ Preventive services are to be covered without any cost-sharing requirement.
  - ★ For plans with both in- and out-of-network coverage, the cost-sharing requirement applies to in-network coverage only. However, these types of plans are not required to provide coverage for recommended preventive services delivered by an out-of-network provider or may impose cost-sharing for recommended preventive services delivered by an out-of-network health care provider.
- ★ Plans without a network, e.g. indemnity plans, must cover preventive care 100%.
- ★ The regulation references preventive care services outlined by the United States Preventive Services Task Force with an A or B rating. They are listed in this fact sheet and can be found at: <http://www.healthcare.gov/center/regulations/prevention/taskforce.html>.
- ★ If a guideline for a recommended preventive service does not specify the frequency, method, treatment, or setting for the service, the plan or issuer may use "reasonable medical management techniques" to determine any coverage limitations on the service.
- ★ As new or updated preventive care recommendations or guidelines are issued, employers and insurers have one year to implement the new guidelines.
- ★ Plans that cover preventive services in addition to those required may apply cost-sharing requirements for the additional services.

### CIGNA's Focus on Prevention

At CIGNA, we fully support evidence-based preventive care for everyone. We see this regulation as a means to help shift our U.S. health care model from one focused on treating illness to one focused on prevention and improving health. In fact, we already cover 100% of preventive benefits with no out-of-pocket cost to our customers as part of our consumer-directed health plans. As an industry leader in early detection and personalized health intervention, our efforts provide a measurable impact on employee health and have proven to reduce costs in the short term as well as over time.

## General List of Services to be Offered Without Copay, Coinsurance or Deductible:

### Evidence-based preventive services:

This list of items is taken from the current recommendations of the United States Preventive Services Task Force. They are included only if they have a rating of A or B. This broad list generally includes:

- ★ Breast cancer and cervical cancer screenings
- ★ Colon cancer screenings
- ★ Screening for iron deficiency anemia in pregnancy
- ★ Screenings for diabetes, high cholesterol and high blood pressure

**Routine vaccinations:** A list of immunizations recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention are included in the rule. They are considered routine for use with children, adolescents, and adults and range from childhood immunizations to periodic tetanus shots for adults.

**Prevention for children:** The rule includes preventive care guidelines for children from birth to age 21 developed by the Health Resources and Services Administration with the American Academy of Pediatrics. Services include regular pediatrician visits, vision and hearing screening, developmental assessments, immunizations, and screening and counseling to address obesity.

**Prevention for women:** The regulation mandates certain preventive care measures for women. These recommendations will be in place until new requirements for prevention for women are issued by the United States Preventive Services Task Force or appear in comprehensive guidelines supported by the Health Resources and Services Administration. The new requirements are expected to be released by August 1, 2011.

**Breast cancer screening:** The most recent recommendations issued in November 2009 should be disregarded and the prior recommendations issued in 2002 should be used until new recommendations are issued. This means that until further notice all women age 40 and over should have an annual mammogram and clinical breast exam.

For a full list of covered preventive services issued as part of the Interim Final Regulations, see the list within this fact sheet or visit: <http://www.healthcare.gov/center/regulations/prevention/taskforce.html>.

## Billing and Office Visits

If a recommended preventive item or service is billed separately from an office visit, then cost-sharing may be applied to the office visit.

If a recommended preventive item or service is not billed separately from an office visit and the primary purpose of the office visit is preventive care, then cost-sharing requirements may not be imposed with respect to the office visit.

If a recommended preventive item or service is not billed separately from an office visit and the primary purpose of the office visit is not preventive care, then cost-sharing may be applied to the office visit.

### The Positive Impact of 100% Coverage

Chronic diseases, such as heart disease, cancer, and diabetes, are responsible for seven of ten deaths among Americans each year and account for 75 percent of the nation's health spending. In many cases, chronic diseases are preventable. However, health plans with cost sharing such as copayments, deductibles or coinsurance for preventive care have been found to reduce the likelihood that these services will be used.\*

By eliminating cost sharing for in-network preventive care, employers can expect higher enrollee utilization of these important, possibly life-saving services. At CIGNA we have found this to be true with our consumer-directed plans that feature 100% preventive care coverage. A recent CIGNA study revealed 16% higher preventive care visits among consumer-directed enrollees in the first year than those in traditional plans.\*\*

\* [www.hhs.gov](http://www.hhs.gov)

\*\* CIGNA Choice Fund Experience Study, December 2009

## List of Covered Preventive Care Services

### Children and Adolescents

#### Newborns

- Screening all newborns for
  - Hearing loss
  - Hypothyroidism
  - Sickle cell disease
  - Phenylketonuria (PKU)
- Gonorrhea preventive medication for eyes of all newborns

#### Childhood/Adolescent Immunizations

- Diphtheria, Tetanus, Pertussis
- Haemophilus influenzae type B
- Hepatitis A and B
- Human Papillomavirus (HPV)
- Influenza (Flu)
- Measles, Mumps, Rubella
- Meningococcal
- Pneumococcal (pneumonia)
- Inactivated Poliovirus
- Rotavirus
- Varicella (chickenpox)

#### Childhood Screenings

- Medical history for all children throughout development
- Height, weight and Body Mass Index (BMI) measurements
- Developmental screening for children throughout childhood
- Autism screening for children at 18 and 24 months
- Behavioral assessment for children of all ages
- Vision screening
- Oral health risk assessment for young children
- Hematocrit or Hemoglobin screening
- Obesity screening and weight management counseling for children age 6 or older
- Iron supplements for children 6 to 12 months who are at higher risk for anemia
- Fluoride supplements for children without fluoride in their water
- Lead screening for children at risk of exposure
- Dyslipidemia screening for children at higher risk of lipid disorder
- Tuberculin testing for children at higher risk of tuberculosis

#### Additional Screenings for Adolescents

- Depression screening
- Alcohol and drug use assessment
- Counseling to prevent sexually transmitted infections (STIs) for sexually active adolescents
- Cervical dysplasia screening for sexually active young women
- HIV screening for adolescents at higher risk

### Health Screenings for Adults

- Blood pressure screening for all adults
- Cholesterol screening for men age 35 and older, women age 45 and older, and younger adults at higher risk
- Diabetes screening for type 2 diabetes for adults with high blood pressure
- HIV and sexually transmitted infection (STI) screenings for adults at higher risk

#### Cancer Screenings

- Breast cancer mammography every 1 to 2 years for women over age 40
- Breast cancer chemoprevention counseling for women at high risk for breast cancer
- Cervical cancer pap test for women
- Colorectal cancer screenings including fecal occult blood testing, sigmoidoscopy or colonoscopy from age 50 to 75
- Prostate cancer (PSA) screening for men

#### Health Counseling

- Doctors are encouraged to counsel patients about these health issues and refer them to appropriate resources as needed:
  - Healthy diet
  - Weight loss
  - Tobacco use
  - Alcohol misuse
  - Depression
  - Prevention of sexually transmitted infections (STIs)
  - Use of aspirin to prevent cardiovascular disease

## List of Covered Preventive Care Services

### Adult Immunizations

- Hepatitis A and B
- Herpes Zoster
- Human Papillomavirus (HPV)
- Influenza (Flu)
- Measles, Mumps, Rubella
- Meningococcal
- Pneumococcal (pneumonia)
- Tetanus, Diphtheria, Pertussis
- Varicella (chickenpox)

### Screenings for Men

- Abdominal aortic aneurysm one-time screening for men age 65 to 75 who have smoked

### Screenings for Women

- Osteoporosis screening for women age 60 and older, depending on risk factors
- Chlamydia infection screening for sexually active women age 24 and younger and other women at higher risk
- Gonorrhea and syphilis screening for sexually active women at higher risk
- BRCA counseling about genetic testing for women at higher risk

### Specifically for Pregnant Women

- Folic acid supplements for women who may become pregnant
- Anemia screening for iron deficiency
- Tobacco cessation counseling for all pregnant women who smoke
- Syphilis screening for all pregnant women
- Hepatitis B screening during the first prenatal visit
- Rh incompatibility blood type testing at first prenatal visit and at 24-28 weeks
- Bacteriuria urinary tract infection screening at 12 to 16 weeks
- Breastfeeding education to promote breastfeeding



Please continue to visit the CIGNA Health Care Reform website at [www.InformedOnReform.com](http://www.InformedOnReform.com). We will post any new developments to this site.

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