# An independent member of the Blue Shield Association

## 1B Preventive Health Services [Post USPSTF (Including Women's Preventive)]

Page 1 of 58



**Benefit Policy** 

1B Preventive Health Services [Post USPSTF (Including Women's Preventive)]		
Group Plans (**)	Effective Date* July 1, 2012 or upon renewal	Last Update: Dec. 29, 2021
Individual and Family Plans	Effective Date* July1, 2012 or upon renewal	

<sup>\*\*</sup>Group Plans excluding Medicare and Medi-Cal

#### Description

This policy incorporates the Affordable Care Act (ACA) of the health reform legislation, adopting United States (US) Preventive Services Task Force (USPSTF) recommendations; the US Department of Health and Human Services, Health Resources and Services Administration (HRSA) recommendations for infants, children, adolescents and women; immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC), Bright Future for Infants and Children, and additional requirements mandated by the state of California\*\*\*.

The USPSTF has been conducting rigorous reviews of research evidence to create evidence-based recommendations for preventive services since 1984. The recommendations are intended to improve health outcomes from heart disease, cancer, infectious diseases, and other conditions and events that impact the health of children, adolescents, adults, and pregnant women. The USPSTF recommendations are routinely used to provide high-quality and appropriate preventive care. All recommendations are linked to a letter grade that reflects the magnitude of net benefit and the strength and certainty of the evidence supporting the provision of a specific preventive service. Aligning with the ACA of the Health Care Reform legislation, the recommendations with a grade of A and B (recommended) have been adopted by Blue Shield of California (BSC). Additional evidence-based preventive care services and screenings provided for in the comprehensive guidelines supported by HRSA and immunizations recommended by ACIP have been adopted by BSC.

## Policy

These preventive care services, when criteria are met and the primary reason for the visit is preventive care, will be provided under the preventive care services benefits with no cost-sharing to the member, when applicable procedure code and diagnosis codes are billed. When the primary reason for a visit is non-preventive, however, the entire visit will be provided under the medical benefit of the member's plan, and cost-sharing may apply per member benefits.

Page 2 of 58

#### Annual Health Appraisal - [USPSTF (2012) & HRSA (2016)]

Annual Health Appraisal is a covered service for all patients:

- Annual preventive care visits for adult, well woman and child visits
- Scheduled well baby visits

The primary purpose of these visits should be the delivery and coordination of recommended preventive services as determined by age and risk factors.

Applicable ICD-10 diagnoses codes – Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z01.411, Z01.419, Z01.42, Z13.1, Z13.21, Z13.228, Z13.29, Z13.30, Z13.39, Z13.41, Z13.42, Z32.00, Z32.01, Z76.1, Z76.2, Z82.2, Z91.81

Applicable procedure codes – 81000, 81001, 81002, 81003, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, G0101, S0302, S0610, S0612, S0613

Applicable revenue codes - 0300, 0307, 0309, 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Screening for Hearing Loss in Children is contained elsewhere in this policy)

99173-Vision screening- is only applicable for ages 3 years and older, including adults, and with the following ICD-10 diagnosis codes are applicable: Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z01.00, Z01.01, Z76.1, Z76.2

(Additional Vision Screening benefits for children are contained elsewhere in this policy under "Vision Screening")

## Abdominal Aortic Aneurysm: Screening - [USPSTF (2014)]

Screening for abdominal aortic aneurysm (AAA) is a covered service for patients who meet all of the following criteria:

- 65 to 75 years of age
- History of smoking
- One-time screening
- Performed by ultrasonography

Applicable ICD-10 diagnosis codes – F17.200, F17.201, F17.203, F17.208, F17.209, F17.210, F17.211, F17.213, F17.218, F17.219, F17.290, F17.291, F17.293, F17.298, F17.299, Z87.891

Applicable procedure codes - 76706

Applicable revenue codes - 0402, 0770

# Abnormal Blood Glucose and Diabetes Mellitus (Type 2): Screening - [USPSTF (2008) (2015) (2020)]

Screening for abnormal blood glucose and screening for Diabetes Mellitus (Type 2) in a primary care setting is a covered service for:

- Adults aged 40 to 70 years who are overweight or obese and have no obvious symptoms of diabetes.
- Adults who have a family history of diabetes, history of gestational diabetes, or history of polycystic ovarian syndrome.
- Adults who are members of certain racial/ethnic groups that may be at increased risk.

\*Clinicians should offer or refer patients with abnormal blood glucose to intensive behavioral counseling interventions to promote a healthful diet and physical activity.

Applicable ICD-10 diagnosis codes – Z13.1, Z83.3, Z86.32, E28.2, E66.01, E66.09, E66.1, E66.2, E66.3, E66.8, E66.9, O99.810, R73.01, R73.02, R73.03, R73.09, R73.9

Applicable procedure codes – 82947, 83036, 0403T, 0488T, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0301, 0309, 0770, 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Abnormal Blood Glucose-Diabetes Mellitus (Type 2) screening can also be performed during the Annual Health Appraisal)

# Unhealthy Alcohol Use in Adults: Screening and Behavioral Counseling Interventions - [USPSTF (2013) (2018)]

Screening for unhealthy alcohol use in primary care settings in adults, including pregnant women; and providing persons engaging in risky or hazardous drinking with brief behavioral counseling interventions to reduce unhealth alcohol use.

Screening and behavioral counseling interventions in primary care to reduce alcohol misuse are a covered service for:

• All adults and pregnant individuals – 12 years of age and older

Applicable ICD-10 diagnosis codes – F10.10, F10.120, F10.129, F10.929, Z71.41, Pregnancy diagnosis code (see list below)

Applicable procedure codes - 99401, 99402, 99403, 99404, 99408, 99409, 99411, 99412, G0396, G0397, G0442, G0443, G2011

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Screening and behavioral counseling interventions can also be included during the Annual Health Appraisal)

Page 4 of 58

#### Adolescent Alcohol and Substance Use: Screening - (Bright Future)

Screening for alcohol use and substance use in primary care for all adolescents -12 to 17 years of age.

Screening should be performed as part of an age-appropriate comprehensive history and/or when the following risk factors have been identified-

Risk factors are as follows-

- A family history of substance use or mood disorders.
- Poor parental supervision and household disruption are associated with involvement in substance use and other risk behaviors.
- Low academic achievement and/or academic aspirations.
- Untreated attention-deficit disorder (ADD) and attention-deficit/hyperactivity disorder (ADHD)
- Perceived peer acceptance of substance use and substance use in peers.

Applicable ICD-10 diagnosis codes – Z00.121, Z00.129, Z81.1, Z81.4, F10.10 F11.10, F11.150, F11.20, F11.250, F11.950, F12.10, F12.150, F12.20, F12.250, F12.90, F12.950, F13.10, F13.150, F13.250, F13.90, F13.950, F14.10, F14.150, F14.20, F14.250, F15.250, F15.950, F15.950, F16.150, F16.90, F16.950, F18.10, F18.150, F18.250, F18.950, F18.950, F19.10, F19.150, F19.20, F19.250, F19.950, F55.8, Z81.3

Applicable procedure codes - 99408, 99409, G0396, G0397, G0442, G0443, G2011

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Screening Adolescent Alcohol and Substance Use can also be included during the Annual Health Appraisal)

#### Alpha-Fetoprotein – [SB75]

Alpha-fetoprotein testing is a screening test which helps to identify pregnant women who are at increased risk of having a baby with a birth defect.

Alpha-fetoprotein testing is a covered service for patients who meet the following criteria:

All pregnant individuals between 15- and 20-weeks' gestation—once per pregnancy

Applicable ICD-10 diagnosis code - Pregnancy diagnosis list (see below).

Applicable procedure codes - 36415, 81508, 81511

#### Anemia - [Bright Futures]

Screening, annually, for iron deficiency anemia is a covered service for patients who meet the following criteria:

• Ages newborn to 21 years of age

Page 5 of 58

Applicable ICD-10 diagnosis codes - Z00.110, Z00.111, Z00.121, Z00.129, Z13.0, Z76.2

Applicable procedure codes -- 85013, 85014, 85018, 36415, 36416 (preventive benefits apply to 36415 or 36416 when 36415 or 36416 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0305, 0309, 0770

# Aspirin Use to Prevent Cardiovascular Disease and Colorectal Cancer: Preventive Medication - [USPSTF (2016) (2018)]

Preventive care visits to discuss the use and coverage of low-dose aspirin (81 mg/d) use for the primary prevention of cardiovascular disease (CVD) and colorectal cancer (CRC) in:

- Adults aged 50 to 59 years with a ≥10% 10-year CVD risk
- Not at increased risk for bleeding
- A life expectancy of at least 10 years
- Willing to take low-dose aspirin daily for at least 10 years

These services are considered inclusive in the preventive care visit, and therefore not separately reimbursable.

Applicable ICD-10 diagnosis codes - None

Applicable procedure codes - None

(This is a pharmacy benefit.)

#### Asymptomatic Bacteriuria in Adults- [USPSTF (2008) (2019)]

Screening for asymptomatic bacteriuria, through urine culture, is a covered service for patients who meet either of the following criteria:

- Pregnant individuals at 12 to 16 weeks' gestation
- Pregnant individuals at their first prenatal visit, if after 16 weeks' gestation
- Pregnant adolescents ages 12 years and older

Applicable ICD-10 diagnosis codes - Pregnancy diagnosis code (see list below)

Applicable procedure codes - 81007, 87081, 87084, 87086, 87088

Applicable revenue codes - 0300, 0306, 0307, 0309, 0770

#### Breast Cancer Screening: Mammogram - [USPSTF (2009) & HRSA (2016)]

Screening for breast cancer is a covered service for patients who meet all of the following criteria:

Page 6 of 58

- 40 years and older
- Performed every 1 to 2 years

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z01.411, Z01.419, Z12.31, Z12.39, Z85.3, Z80.3

Applicable procedure codes - 77067, 77063. Please note that 77063 is an add-on code.

Applicable revenue codes - 0403, 0770

## Breastfeeding - [USPSTF (2016) & HRSA (2016)]

USPSTF recommends providing interventions during pregnancy and after birth to support breastfeeding. Interventions includes breastfeeding support during pregnancy and through the early life of the child. Clinicians can support women directly or through referral, to help women make an informed choice about breastfeeding and breastfeeding benefits.

HRSA recommends comprehensive lactation support services (including counseling, education, and breastfeeding equipment and supplies) during the antenatal, perinatal, and the postpartum period to ensure the successful initiation and maintenance of breastfeeding.

Primary care interventions to promote breastfeeding are a covered service for patients who meet either of the following criteria:

- During pregnancy
- After birth

Please Note--Lactation support services are considered inclusive in the maternal care visits and annual health appraisals, and therefore not separately reimbursable.

Applicable procedure codes -A4281, A4282, A4283, A4284, A4285, A4286, E0602\*, E0603\*, K1005

Applicable revenue codes for Breast Pump Rental/Purchase - 0270, 0271, 0272, 0290, 0294

\* E0602 & E0603 allowed as purchase only.

HCPCS Code E0604 is a hospital grade breast pump and is not covered.

# BRCA- Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing - [USPSTF (2013)]

USPSTF recommends screening women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or who have an ancestry associated with breast cancer susceptibility 1 and 2 (BRCA ½) gene mutations with an appropriate brief familial risk assessment tool. Women with positive screening results should receive genetic counseling and, if indicated after counseling, BRCA.

Page 7 of 58

This service is included as part of the Preventive Benefit, per ACA, with no cost-sharing by members, if medically necessary – please see BSC medical policy Genetic Testing for Hereditary Breast and/or Ovarian Cancer):

 Personal or family history associated with an increased risk for deleterious mutations in BRCA1 or BRCA2 genes

Applicable ICD-10 diagnosis codes – Z80.0, Z80.3, Z80.41, Z80.42, Z80.49, Z80.51, Z80.8, Z85.07, Z85.3, Z85.43, Z85.44, Z85.46, Z85.520, Z15.01, Z15.02, Z15.03, Z15.04, Z86.000, Z86.001, Z85.048, Z85.09

Applicable procedure codes - 36415, 81162, 81163, 81164, 81165, 81166, 81167, 81212, 81215, 81216, 81217, 81432, 81433, 81479, 96040, S0265, 0102U, 0103U, 0138U, 99401, 99402, 99403, 99404 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0310, 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(BRCA assessment, genetic counseling and testing can also be included during the Annual Health Appraisal)

#### Breast Cancer: Medications for Risk Reduction - [USPSTF (2013) (2019)]

The USPSTF recommends that clinicians offer to prescribe risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors, to women who are at increased risk for breast cancer and at low risk for adverse medication effects, also includes asymptomatic women 35 years and older, including women with previous benign breast lesions on biopsy (such as atypical ductal or lobular hyperplasia and lobular carcinoma in situ) to all individuals who meet all of the following criteria:

- At high risk for breast cancer
- At low risk for adverse medication effects

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z01.411, Z01.419, Z15.01, Z80.3

Applicable procedure codes -99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99401, 99402, 99403, 99404

Applicable revenue codes - 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Screening and discussion can also be included during the Annual Health Appraisal)

# Cervical Cancer (Pap smear) Screen, including Human Papillomavirus (HPV) Screening - [USPSTF (2012) (2018), HRSA (2016) and Bright Future]

Screening for cervical cancer is a covered service for patients who meet **all** the following criteria:

Women aged 12 to 29 years

- Individuals who have a cervix
- Within three years of onset of sexual activity

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Page 8 of 58

- Age 21 if not sexually active by age 18
- Every 3 years with cytology alone

Women aged 30 to 65 years

- Every 3 years with cytology alone
- Every 3 years with high-risk HPV testing alone
- Every 3 years with co-testing (high-risk HPV testing with cytology)

\*Please note-- Human papillomavirus (HPV) is a covered service for patients who are age 30 years and older, in conjunction with cervical cancer screening (Papsmear).

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z00.121, Z00.129, Z01.411, Z01.419, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z12.4, Z12.72, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z72.51, Z72.52, Z72.53, Z71.7, Z72.89, Z77.21, Z77.9, Z91.89, Z86.001

Cervical Cancer Screening applicable procedure codes – 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88164, 88165, 88166, 88167, 88174, 88175, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, G0476, Q0091, P3000, P3001

\*Screening for human papillomavirus (HPV) is a covered service for patients who meet all of the following criteria:

- Sexually active
- Age 30 and older
- Human papillomavirus (HPV) is a covered service for patients who are age 30 years and older, in conjunction with cervical cancer screening (Papsmear)- once every 3 years

HPV applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z00.121, Z00.129, Z01.411, Z01.419, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z12.4, Z12.72, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.51, Z72.52, Z72.53, Z72.89, Z77.21, Z77.9, Z91.89, Z86.001

HPV screening applicable procedure codes - 87623, 87624, 87625, G0476, 0500T

Applicable revenue codes - 0300, 0301, 0302, 0306, 0309, 0310, 0311, 0319, 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770, 0923

#### Chlamydia (STD) Infection and Gonorrhea Screening- [USPSTF (2014) Bright Futures]

Screening for Chlamydia infection and/or gonorrhea is a covered service for patients who meet **any** of the following criteria:

- Sexually active individuals aged 12 years and older
- Sexually active asymptomatic individuals aged 24 years and older with any of the following risk factors:
  - o History of Chlamydia, Gonorrhea, or other sexually transmitted infection
  - o New or multiple sexual partners
  - Inconsistent condom use
  - o Commercial sex worker
  - o Drug use

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Page 9 of 58

- Pregnant individuals in a high-risk group:
  - o At first prenatal visit
  - Second screening during the third trimester for those who are at continued risk or who acquire a new risk factor

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z00.121, Z00.129, Z01.411, Z01.419, Z11.3, Z11.8, Z11.9, Z20.2, Z72.51, Z72.52, Z72.53, and pregnancy diagnosis code (see list below)

Applicable procedure codes - 87110, 87205, 87210, 87270, 87320, 87490, 87491, 87492, 87590, 87591, 87563, 87592, 87660, 87661, 87808, 87810, 87850

Applicable revenue codes - 0300, 0306, 0309, 0770

#### Colorectal Cancer - [USPSTF (2016) (2021)]

Screening for colorectal cancer is a covered service for patients who meet either of the following criteria:

- Adults 45 to 75 years of age
- Beginning age and screening intervals can be reduced for patients at high risk for colorectal cancer any of the following procedures and intervals:
  - Fecal occult blood performed annually
  - o Screening barium enemas every 5 years
  - o Sigmoidoscopy performed every 5 years
  - o Colonoscopy performed every 10 years
  - o Multi-targeted stool DNA testing every 3 years

"High Risk for developing colorectal cancer" is defined in the Code of Federal Regulations (CFR) at 42 CFR 410.37(a)(3).

"AB 342 mandate" requires health care service plan contracts/health insurance policies to provide without any cost-sharing to the member-(Jan. 1, 2022)

Applicable ICD-10 diagnosis codes – Z12.11, Z12.12 (Z00.00, Z00.01, Z01.411, Z01.419 only applies to procedure code 82270 & 82274)

\*\*High Risk ICD-10 diagnosis codes – Z80.0, Z83.71, Z83.79, Z85.030, Z85.038, Z86.010, Z85.048, K50.00, K50.10, K50.80, K50.90, K51.00, K51.20, K51.30, K51.40. K51.50, K51.80, K51.90

Applicable procedure codes – 00811\*\*, 00812\*\*, 00813\*\*, 45330, 45331, 45332, 45333, 45335##, 45338, 45378, 45380, 45381, 45384, 45385, 74280, 81528, 82270, 82274, 88305++, 99152, 99153, G0104, G0105, G0106, G0120, G0121, G0328, G0500, J0300, J2175, J2180, J2250, J2704, J3010++, J3360, S0285

00811\*\*, 00812\*\*, 00813\* (Optional Modifier 33) is only applicable when Medical Criteria has been met. Please see Medical Policy for Monitored Anesthesia Care.

45335## is only applicable when Medical Criteria has been met. Please see Medical Policy for Injectable Bulking Agents for the Treatment of Urinary and Fecal Incontinence.

Page 10 of 58

J3010<sup>++</sup> is only applicable when Medical Criteria has been met. Please see Medical Policy for Pain Medication Administration Through Pain Pumps.

81528-Please note that 81528 is applicable to all LOBs.

88305<sup>++</sup> must be appended with modifier 33 with the applicable diagnosis codes- D12.2, D12.3, D12.4, D12.5, D12.6, D37.4, D49.0, K50.00, K50.10, K50.80, K50.90, K51.00, K51.20, K51.30, K51.40. K51.50, K51.80, K51.90, K62.0, K62.1, K63.5, Z80.0, Z83.71, Z83.79, Z85.030, Z85.038, Z86.010, Z85.048, and without modifier 33 with the applicable diagnosis codes Z12.11, Z12.12

Applicable revenue codes – 0250, 0300, 0301, 0305, 0309, 0310, 0312, 0319, 0320, 0329, 0360, 0361, 0369, 0370, 0371, 0372, 0490, 0499, 0500, 0509, 0510, 0517, 0519, 0520, 0521, 0523, 0529, 0636, 0750, 0760, 0761, 0769, 0770, 0963, 0964

Modifier 33 or PT have been created to append to services furnished in connection with or in relation to a colorectal cancer screening test that starts as preventive and becomes diagnostic. BSC recognizes this modifier for claims billed for preventive services as outlined in this policy and will process accordingly if performed on the same date of service and in the same encounter.

The 33 modifier will be recognized and accepted with the use of the following codes: 45330, 45331, 45332, 45333, 45335, 45338, 45378, 45380, 45381, 45384, 45385, 82274, G0500.

The PT modifier will be recognized and accepted with the use of the following codes: 00811, 45330, 45331, 45332, 45333, 45335, 45338, 45378, 45380, 45381, 45384, 45385, 88305

#### Contraception - [HRSA (2016)]

The full range of Food and Drug Administration-approved female contraceptive methods, female sterilization procedures, and patient education and counseling is a covered benefit for:

• All individuals of reproductive capacity (Adolescents and adult)

Contraceptive care should include contraceptive counseling, initiation of contraceptive use, and follow-up care (e.g., management, and evaluation as well as changes to and removal or discontinuation of the contraceptive method).

Applicable ICD-10 diagnosis codes – Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.2, Z30.40, Z30.41, Z30.42, Z30.430, Z30.431, Z30.432, Z30.433, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z92.0, Z98.51, Z97.5

Applicable CPT/HCPCS codes: A4261, A4264, A4266, A4268, A4269, J1050, J7296, J7297, J7298, J7300, J7301, J7303, J7304, J7306, J7307, S4981, S4989, S4993, 00851, 00940, 00952, 11976, 11981, 11982, 11983, 57170, 58300, 58301, 58340, 58565, 58600, 58605, 58611, 58615, 58670, 58671, 74740, 99211, 99212, 99213, 99214, 99215, 99202, 99203, 99204, 99205, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412

96372 is allowable with all the diagnosis listed when billed with J1050

Applicable ICD-10 procedure codes – 0U570ZZ, 0U573ZZ, 0U574ZZ, 0U577ZZ, 0U578ZZ, 0UL70CZ, 0UL70DZ, 0UL70ZZ, 0UL73CZ, 0UL73DZ, 0UL73ZZ, 0UL74CZ, 0UL74DZ, 0UL74ZZ, 0UL77DZ, 0UL77ZZ, Reproduction without authorization from Blue Shield of California is prohibited.

Page 11 of 58

OUL78DZ, OUL78ZZ

Applicable revenue codes - 0250, 0270, 0272, 0278, 0279, 0320, 0329, 0360, 0361, 0369, 0370, 0371, 0372, 0379, 0450, 0451, 0452, 0456, 0459. 0490, 0499, 0510, 0511, 0512, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0529, 0636, 0760, 0761, 0762, 0769, 0770

\*Revenue codes 0450, 0451, 0452, 0456, 0459, 0516, and 0526 are only allowed for removal of contraception devices or implants.

(Contraception can also be included during the Annual Health Appraisal)

#### COVID-19 [AMA, CDC, ACIP [(2020) (2021) (2022)]

In response to the COVID-19 pandemic and Public Health Emergency and SB 510, the FDA has approved and recommends vaccines be given as a covered service for all patients who meet the criteria as established by the Center for Disease Control (CDC), the Advisory Committee on Immunization Practices (ACIP), utilizing standard industry coding.

Before vaccination, providers should counsel COVID-19 vaccine recipients, parents, or guardians about possible post-vaccination reactions. Vaccines and immunization counselling will be covered at no cost under the Preventive Benefit.

- All adults
- Pregnant women, age 12 years and older
- Adolescents and children ages 5 and older

Applicable procedure codes for Immunizations - 91300, 91301, 91302, 91303, 91304, 91305, 91306, 91307, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0021A, 0022A, 0031A, 0034A, 0041A, 0042A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, D1701, D1702, D1703, D1704, D1705, D1706, D1707, M0201

Applicable procedure codes for Immunization counseling - 99401, 99402, 99403, 99404

Applicable diagnosis code for Immunization counseling - Z71.85

Applicable revenue codes for both immunizations and immunization counseling – 0250, 0256, 0257, 0259, 0500, 0509, 0510, 0512, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0529, 0636, 0770, 0771

# Dental Caries and Oral Fluoride in Children from Birth Through Age 5 Years: Screening - [USPSTF (2014) (Bright Futures (2021)]]

Dental services for the application of fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption in primary care practices, is a covered benefit for:

- Children 6 months to 5 years of age
- Primary water source is deficient in fluoride
- Limit of 2 times a year

Preventive benefits do not include prescription fluoride supplement and OTC supplements—these are not a covered benefit.

Page 12 of 58

Applicable ICD-10 diagnosis codes - Z29.3, Z91.841, Z91.842, Z91.843, Z91.849

Applicable procedure codes - 99188

Applicable revenue codes - 0510, 0512, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Assessing the need of Oral Fluoride supplement can be performed during the annual health appraisal)

#### Depression in Adults: Screening - [USPSTF (2016)]

Screening for <u>depression</u> is a covered service for:

- All adults including pregnant and postpartum women
- Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z01.411, Z01.419, Z13.31, Z13.32, Z13.39

Applicable procedure codes -99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99385, 99386, 99387, 99395, 99396, 99397, 96127\*, 96160, 96161, G0444, S3005

\*CPT code 96127 is only allowable with the following diagnosis codes- Z13.31, Z13.32, Z13.39

\*\* Pregnancy Diagnosis code (see list below) applies to these procedure codes only - 99385, 99386, 99395, 99396, 96160, 96161, G0444, S3005.

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Depression screening can also be included during the Annual Health Appraisal or in conjunction with anxiety screening)

#### Depression in Children and Adolescents: Screening - [USPSTF (2016)]

Screening for major depressive disorder is a covered service for:

- All adolescents (12 to 18 years of age)
- Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z00.121, Z00.129, Z01.411, Z01.419, Z13.31, Z13.32

Applicable procedure codes -99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99384, 99394, 96160, 96161, G0444, S3005

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Depression screening can also be included during the Annual Health Appraisal or in Reproduction without authorization from Blue Shield of California is prohibited.

Page 13 of 58

conjunction with anxiety screening)

#### Perinatal Depression: Preventive Interventions - [USPSTF (2019)]

Clinicians should provide or refer pregnancy and postpartum persons who are at increased risk of perinatal depression to counseling interventions is a covered service for:

- Pregnant women
- Persons who are less than 1 year postpartum
- Does not have a current diagnosis of depression
- Increased risk of developing depression

Applicable ICD-10 diagnosis codes - Perinatal depression diagnosis code (See list below)

Applicable procedure codes -90791, 99401, 99402, 99403, 99404, S3005

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

#### Developmental and Behavioral Disabilities Screening- [Bright Future (2019)]

Screening for development and behavioral disabilities, including Autism, is a covered service for asymptomatic patients-age o to 3 years of age.

- Assessment for children age 0 and 3 years of age
- Screening should be performed at the 9-month visit
- Screening should be performed at 18-month visit (includes <u>Autism spectrum disorder</u> screening)
- Screening should be performed at 2 ½ year visit (includes <u>Autism spectrum disorder</u> screening)

Following the 2½-year visit, administer a validated, standardized, and accurate screening test at all annual health supervision visits based on developmental surveillance and clinical judgment. The tests should be broad in scope, meaning that they sample all developmental domains.

Applicable ICD-10 diagnosis codes – Z00.121, Z00.129, Z13.40, Z13.41, Z13.42, Z13.49, F88, F81.9, F89, G93.40, G93.9, R27.0, R27.8, R27.9, R62.0, R29.6, R29.818, R29.898, R29.90, R29.91

Applicable procedure codes -96110

Applicable revenue codes - 0510, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Development and behavioral disabilities screening can also be performed during the Annual Health Appraisal)

#### Fall Prevention in Community-Dwelling Older Adults: Interventions - [USPSTF (2012, 2018)]

Preventive care visits to discuss exercise interventions to prevent falls is a covered service for patients who meet all of the following criteria (OTC medications are not a covered benefit):

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Page 14 of 58

- Community-dwelling adults (excluding institutionalized, facility-based adults, such as those
  in Skilled Nursing Facilities)
- Aged 65 years or older
- At increased risk for fall

Applicable ICD-10 diagnosis codes - Z91.81

Applicable procedure codes – 97110, 97112, 97113, 97116, 97150, 97161, 97162, 97163, 97164, 97530, G0151, G0157, G0159, S8990, S9131

Applicable revenue codes - 0424, 0510, 0517, 0519, 0520, 0521, 0523, 0529, 0770

# Folic Acid for the Prevention of Neural Tube Defects: Preventive Medication- [USPSTF (2009) (2017)]

Discussion of the use of 0.4 to 0.8 mg daily of folic acid is a covered benefit for all patients who meet the following criteria (OTC medications are not a covered benefit):

• Planning or capable of pregnancy

These services are considered inclusive in the preventive care visit, and therefore not separately Reimbursable.

Applicable ICD-10 diagnosis codes - None

Applicable procedure codes - None

#### Gestational Diabetes Mellitus, Screening - [USPSTF (2014) & HRSA (2016) (2019)]

Screening for gestational diabetes is a covered service for asymptomatic pregnant individuals who meet any of the following criteria:

- 2 screenings per pregnancy Between 24-28 weeks of gestation (or later in persons who enter prenatal care after 28 weeks of gestation)
- At the first prenatal visit for women identified to be at high risk for diabetes

Applicable ICD-10 diagnosis codes - Pregnancy diagnosis code (see list below)

Applicable procedure codes – 82947, 82948, 82950, 82951, 82952, 83036, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0301, 0309, 0770

## Gonorrhea (STD) - [USPSTF (2014)]

Gonorrhea (STD) has been combined with the Chlamydia (STD) Infection category, as of September 2019.

Please refer to the Chlamydia category for criteria.

Page 15 of 58

Healthful Diet and Physical Activity for Cardiovascular Disease Prevention in Adults with Cardiovascular Risk Factors/Abnormal Blood Glucose Screening/Obesity: Behavioral Counseling - [USPSTF (2014) (2020)]

Offering or referring adults aged 18 years and older, with cardiovascular disease risk factors (known hypertension or elevated blood pressure, elevated lipid levels or dyslipidemia, and mixed or multiple risk factors (eg, metabolic syndrome or estimated 10-year CVD risk of ≥7.5%) to behavioral counseling interventions to promote a healthful diet and physical activity for CVD prevention.

Applicable ICD-10 diagnosis codes- E78.00, E78.01, E78.1, E78.2, E78.3, E78.41, E78.49, E78.5, E78.6, E88.81, E88.89, E88.9, I10, I15.0, I15.1, I15.2, I15.8, I15.9, O10.011, O10.012, O10.013, O10.019, O10.111, O10.112, O10.113, O10.119, O10.211, O10.212, O10.213, O10.219, O10.311, O10.312, O10.313, O10.319, O10.411, O10.412, O10.413, O10.419, O10.911, O10.912, O10.913, O10.919, O11.1, O11.2, O11.3, O11.9, O13.1, O13.2, O13.3, O13.9, O16.1, O16.2, O16.3, O16.9, R03.0

Applicable procedure codes – 99401, 99402, 99403, 99404, 99411, 99412, G0446, 97802\*\*, 97803\*\*, 97804\*\*

\*\*97802, 97803, 97804-only allowable with the following DX codes-E78.2, E78.3, E78.41, E78.49, E78.5, E78.6, E88.81.

Applicable revenue codes - 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Healthful Diet and Physical Activity for CVD Prevention in Adults with Cardiovascular Risk Factors: Behavioral Counseling can also be included during Annual Health Appraisal)

# Healthy Weight and Weight Gain in Pregnancy: Behavioral Counseling Interventions – [USPSTF (2021)]

The USPSTF recommends that clinicians offer pregnant persons effective behavioral counseling interventions aimed at promoting healthy weight gain and preventing excess gestational weight gain in pregnancy.

Primary care clinicians can deliver effective in-person behavioral counseling interventions or refer patients to behavioral counseling interventions in other settings.

This applies to all individuals, age 12 years and older.

Applicable ICD-10 diagnosis codes - Pregnancy diagnosis table (see list below)

Applicable procedure codes - 99401, 99402, 99403, 99404, 99411, 99412, G0473, G0447

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(The screening and counseling can also occur and be inclusive of the prenatal or antepartum care).

Page 16 of 58

#### Hepatitis B Virus Infection in Adolescents and Adults: Screening- [USPSTF (2014) (2020)]

Screening for hepatitis B virus infection is a covered service for patients who meet the following criteria:

Pregnant individuals at their first prenatal visit

Applicable ICD-10 diagnosis codes - Pregnancy diagnosis table (see list below)

Applicable procedure code – 80055, 80081, 86704, 86705, 86706, 87340, 87341, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable Revenue Codes - 0300, 0301, 0302, 0306, 0309, 0390, 0770

• Non-pregnant, asymptomatic, adolescents and adults at increased risk for HBV infection-including those who were vaccinated before being screened for HBV infection.

Applicable ICD-10 diagnosis codes – Z72.51, Z72.52, Z72.53, Z77.21, Z57.8, Z00.00, Z00.01, Z11.59, Z11.3, Z11.4, Z20.2, Z20.5

Applicable procedure code – 86704, 86705, 86706, 87340, 87341, G0499, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable Revenue Codes - 0300, 0301, 0302, 0306, 0309, 0390, 0770

#### Hepatitis C Virus Infection in Adolescents and Adults: Screening - [USPSTF (2013) (2020)]

Screening for hepatitis C virus infection is a covered service for all asymptomatic adults, including pregnant women, age 12 to 99 years of age, without known liver disease. This is a one-time screening.

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z11.3, Z20.2, Z20.5, Z20.6, Z11.59, Z72.51, Z72.52, Z72.53, Z77.21, Z72.89, Pregnancy diagnosis table (see list below)

Applicable procedure code - 86803, 86804, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis) G0472 (when billed with Revenue Codes 0300, 0301, 0770)

Applicable Revenue Codes - 0300, 0301, 0302, 0306, 0309, 0390, 0770

#### Hypertension in Adults: Screening – [USPSTF (2015) (2021)]

Screening for high blood pressure is a covered service for:

All adults aged 18 years or older

Page 30 of 58

Annually

The USPSTF recommends screening for hypertension in adults with office blood pressure measurement (OBPM). The USPSTF also recommends obtaining measurements outside of the clinical setting for diagnostic confirmation before starting treatment (Ambulatory Blood Pressure Measurement is payable as preventive as listed below)

Applicable ICD-10 diagnosis codes - R03.0

Applicable procedure codes - 93784, 93786, 93788, 93790, 99473, 99474

(High blood pressure screening can also be included during the Annual Health Appraisal)

# Human Immunodeficiency Virus (HIV) Infection: Screening- [USPSTF (2013) (2019) & HRSA (2016) Bright Future]

Screening for human immunodeficiency virus (HIV) is a covered service for patients who meet any of the following criteria:

- Pregnant individuals, including women who present in labor and are untested
- All adolescents and adults aged 12-65
- All adolescents' younger than 12 and adults older than 65 with any of the following risk factors:
  - o Receives health care in a high-prevalence or high-risk clinical setting
  - Men who have had sex with men
  - o Individuals having unprotected sex with multiple partners
  - o Past or present injection drug user
  - o Commercial sex worker
  - o Individuals whose past or present sex partners were any of the following:
    - → HIV-infected
    - → Bisexual
    - + Injection drug users
    - → Individuals being treated for sexually transmitted diseases

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z00.121, Z00.129, Z20.2, Z20.5, Z22.6, Z11.3, Z11.4, Z11.59, Z20.6, Z72.51, Z72.52, Z72.53, Z77.21, and pregnancy diagnosis code

Applicable procedure codes – 80081, 81025, 82540, 82565, 82570, 82575, 84702, 86689, 86701, 86702, 86703, 87389, 87390, 87391, 87534, 87535, 87536, 87537, 87538, 87539, 99401, 99402, 99403, 99404, G0432, G0433, G0435, G0475, S3645, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes – 0300, 0301, 0302, 0306, 0309, 0390, 0510, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0523, 0529, 0770

Page 30 of 58

# Preventive of Human Immunodeficiency Virus (HIV) Infection: Preexposure Prophylaxis – [USPSTF (2019) (2021)]

Clinicians should offer pre-exposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are not infected with HIV and who are at high risk of HIV acquisition.

The USPSTF recommended should be received by a participant, enrollee, or beneficiary prior to being prescribed anti-retroviral medication as part of the determination of whether PrEP is appropriate, as well as ongoing follow-up and monitoring.

#### These services include:

- HIV testing, both at baseline and every 3 months while taking PrEP
- Hepatitis B and C testing
- Creatinine testing and calculated estimated creatine clearance (eCrCl) or glomerular filtration rate (eGFR) to assess kidney function, conducted both at baseline and periodically thereafter, consistent with CDC guidelines
- Pregnancy testing, both at baseline and periodically thereafter
- Sexually transmitted infection (STI) screening and counseling
- Adherence counseling

Applicable ICD-10 diagnosis codes - Z11.3, Z11.4, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53, Z77.21

Applicable CPT codes - 81025, 82565, 82570, 82575, 82540, 84702

\* Counseling for human immunodeficiency virus (HIV) is a covered benefit with the following qualifiers:

Applicable ICD-10 diagnosis codes – Z71.7

Applicable procedure codes – 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412

Applicable revenue codes - 0510, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0523, 0529, 0770

\*All other benefits can be found under Hepatitis B and C, Human Immunodeficiency Virus (HIV), and Sexually transmitted infection (STI) screening and counseling categories.

(The pre-exposure prophylaxis (PrEP) with effective antiretroviral therapy is a pharmacy benefit)

Page 30 of 58

#### Human Papillomavirus (HPV) - [USPSTF (2012) & HRSA (2016) Bright Future]

Screening for human papillomavirus (HPV) is a covered service for patients who meet all of the following criteria:

- Sexually active
- Age 30 and older
- In conjunction with cervical cancer screening (Papsmear)

(Please see Cervical Cancer Screening for Human Papillomavirus (HPV) criteria)

#### Immunizations / Vaccines - [CDC]

Immunizations / vaccines are covered services for all patients who meet the criteria as established by the Advisory Committee on Immunization Practices (ACIP) utilizing standard industry coding (see Appendix for codes):

https://www.cdc.gov/vaccines/schedules/hcp/index.html

# Intimate Partner Violence, Elder Abuse, and Abuse of Vulnerable Adults Screening - [USPSTF (2013, 2018) & HRSA (2016)]

The USPSTF recommends that clinicians screen for intimate partner violence (IPV) in women of reproductive age and provide or refer women, who <u>screen positive</u>, to ongoing support services. These services will pertain to individuals 12 years of age and older.

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z01.411, Z01.419, Z69.81, Z69.11

Applicable procedure codes –99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 90791

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0528, 0529, 0770

(Intimate Partner Violence, Elder Abuse, and Abuse of Vulnerable Adults Screening can also be included during the Annual Health Appraisal)

#### Lead Screening- [State Mandate]

Screening for elevated blood lead levels is a covered service for patients who meet any of the following criteria:

- Risk assessments for children up to 19 years identified as at risk when prescribed by a physician or health care provider
- Lead poisoning based on the concentration of lead in whole "venous, arterial, or cord" blood

Applicable ICD-10 diagnosis codes - R78.71, Z00.121, Z00.129, Z13.88, Z77.011

Page 30 of 58

Applicable procedure code – 83655, 36415, 36416 (preventive benefits apply to 36415 and 36416 when 36415 or 36416 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0301, 0309, 0770

#### Lipid Disorders - [USPSTF (2008) Retired July 2015]

Screening for lipid disorders in adults is a covered service for patients annually who meet **any** of the following criteria:

- Men 40 years of age and to 70 years of age
- Adults 40 to 70 years of age or with any of the following risks factors:
  - o Diabetes
  - Previous personal history of coronary heart disease (CHD) or non-coronary atherosclerosis
  - o Family history of cardiovascular disease before 50 years of age in male relatives and 60 years of age in female relative's
  - o Tobacco use
  - o Hypertension
  - o Obesity (BMI > 30)

Lipid Disorder has been retired. Please refer to Statin Use for the Primary Prevention of Cardiovascular Disease in Adults: Prevention Medication.

#### Lung Cancer - [USPSTF (2013) (2021)]

Annual screening for lung cancer with low-dose computed tomography in adults' ages 50 to 80 years who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years.

Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery.

Applicable ICD-10 diagnosis codes – F17.210, F17.211, F17.213, F17.218, F17.219, Z87.891, Z12.2, Z72.0

Applicable procedure codes -G0296, 71271

#### Newborn Screening Panel – (HRSA 2018 & Bright Futures)

Conditions listed on the Recommended Uniform Screening Panel (RUSP) are part of the comprehensive preventive health guidelines supported by HRSA for infants and children. Non-grandfathered health plans are required to cover screenings included in the HRSA-supported comprehensive guidelines without charging a co-payment, co-insurance, or deductible for plan years beginning on or after the date that is one year from the Secretary's adoption of the condition for screening.

Screening for congenital hypothyroidism is a one-time screening and can be administered during the initial newborn care.

Screening for phenylketonuria (PKU) is a covered service for **all** newborn infants and include the following criteria:

- Newborns tested within the first 24 hours after birth should receive a repeat screening by two weeks of age
- Premature infants and those with illnesses should be testing at or near seven days of age, but in all cases before discharge from the newborn nursery

Screening for sickle cell disease is a covered service for:

All newborn infants

Applicable procedure codes - S3620

\*Please refer to Health Resources & Service Administration (HRSA) for an outline of **all the** recommended uniform screening tests.

https://www.hrsa.gov/advisory-committees/heritable-disorders/rusp/index.html

# Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum: Preventive Medication - [USPSTF (2011 & 2019)]

Prophylactic ocular topical medication to prevent gonococcal ophthalmia neonatorum is a covered service for:

• Newborns (typically administered during the initial hospital newborn care)

These services are considered inclusive in the newborn care visit, and therefore not separately reimbursable.

Applicable ICD-10 diagnosis codes - None

Applicable procedure codes - None

#### Obesity in Children and Adolescents: Screening - [USPSTF (2012, 2013 & 2017)]

Screening for obesity in children and adolescents, and offering of comprehensive, intensive behavioral interventions to promote improvement in weight status are covered services for:

All children six years of age to 18 years of age

Applicable ICD-10 diagnosis codes - Z00.121, Z00.129, Z68.53, Z68.54

Applicable procedure codes – 99383, 99384, 99393, 99394, 99401, 99402, 99403, 99404, 99411, 99412, G0447, G0473

Page 30 of 58

Applicable revenue codes - 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Obesity screening can also be included during the Annual Health Appraisal)

#### Oral Fluoride - [USPSTF (2014)]

Oral Fluoride has been combined with Dental Caries category, as of August 2019.

Please see Dental Caries and Oral Fluoride for additional information.

#### Osteoporosis to Prevent Fractures: Screening- [USPSTF (2012) (2018)]

Screening for osteoporosis is a covered service for patients who meet **any** of the following criteria (medical policy applies for testing intervals for osteoporosis):

- Females 65 years of age and older
- Postmenopausal females younger than 65 years of age with one or more risk factors for osteoporosis- related fractures
- Minimum interval of two years for repeat screening

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z01.411, Z01.419, Z13.820, Z78.0

Applicable procedure codes - 77080, 77081, 76977, 77078, 77085, 78350, 78351, 0554T, 0555T, 0556T, 0557T

Applicable revenue codes - 0320, 0329, 0350, 0352, 0359, 0402, 0770

## Low-Dose Aspirin Use for the Prevention of Morbidity and Mortality from Preeclampsia: Preventive Medication - [USPSTF (2017)]

These services below are considered inclusive in the preventive care visit or included as part of their prenatal visits, and therefore not separately reimbursable.

- Pregnant Women Who are at High Risk for Preeclampsia---Potential benefit with the use of low-dose aspirin (81 mg/d) as preventive medication after 12 weeks of gestation in women who are at high risk for preeclampsia
- Screening Pregnant Women for Pre-eclampsia---The USPSTF recommends using blood pressure measurements throughout the pregnancy to screen for preeclampsia in pregnant women without a known diagnosis of pre-eclampsia or hypertension.

Applicable ICD-10 diagnosis codes - None

Applicable procedure codes - None

Page 30 of 58

#### Prostate Cancer Screening - [State Mandate]

(Cal. Ins. Code § 10123.835 (2017) (Cal. Health & Safety Code § 1367.64 (2017)

Screening for prostate cancer\*\*\* (which includes both a prostate-specific antigen (PSA) test and a digital rectal exam) is a covered service for all patients annually who meet the following criteria:

- Individuals 50 years of age and older
- Individuals 40 to 50 years of age with **one of the following** risk factors who have been advised to have screening or who have requested screening:
- African American
- · Family history of prostate cancer

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z12.5, Z80.42, Z86.002

Applicable procedure codes – 84152, 84153, 84154, G0102, G0103, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0301, 0309, 0510, 0521, 0770

(Prostate cancer screening can also be included during the Annual Health Appraisal)

#### Rh (D) Incompatibility: Screening - [USPSTF (2004)]

Screening for Rh (D) incompatibility is a covered service for patients who meet **any** of the following criteria:

- All Pregnant individuals o During first visit for pregnancy-related care
- Unsensitized Rh (D) negative pregnant individuals
- Repeat testing at 24 to 28 weeks' gestation unless the biological father to be, is known
- Rh (D) negative

Applicable ICD-10 diagnosis codes - Pregnancy diagnosis code (see list below)

Applicable procedure codes – 80055, 80081, 86850, 86900, 86901, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0301, 0309, 0390, 0770

#### Screening for Anxiety - [HRSA (2020)]

The Women's Preventive Services Initiative recommends screening for anxiety in adolescent and adult women, including those who are pregnant or postpartum. Optimal screening intervals are unknown and clinical judgement should be used to determine screening frequency. Given the high prevalence of anxiety disorders, lack of recognition in clinical practice, and multiple problems associated with untreated anxiety, clinicians should consider screening women who

Page 30 of 58

have not been recently screened.

Clinicians may consider screening for anxiety in conjunction with screening for depression, which is recommended by the <u>USPSTF</u>, because of the frequent co-occurrence of anxiety and depressive disorders.

This is a covered service for:

- Adolescents, adults, pregnant and nonpregnant women
- Age 12 years and older

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z01.411, Z01.419, Z13.31, Z13.32, Z13.39, Pregnancy diagnosis code (see list below)

Applicable procedure codes - 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 96127\*, 96160, 96161, G0444, S3005

\*CPT code 96127 is only allowable with the following diagnosis codes- Z13.31, Z13.32, Z13.39\*\*

Pregnancy Diagnosis code (see list below) applies to these procedure codes only - 99385, 99386, 99395, 99396, 96160, 96161, G0444, S3005.

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Screening for anxiety can also be included during the Annual Health Appraisal or in conjunction with depression screening)

#### Screening for Diabetes Mellitus After Pregnancy - [HRSA (2020)]

The Women's Preventive Services Initiative recommends women with a history of gestational diabetes mellitus (GDM) who are not currently pregnant and who have not previously been diagnosed with type 2 diabetes mellitus should be screened for diabetes mellitus. Initial testing should ideally occur within the first year postpartum and can be conducted as early as 4–6 weeks postpartum.

Women with a negative initial postpartum screening test result should be rescreened at least every 3 years for a minimum of 10 years after pregnancy. For women with a positive postpartum screening test result, testing to confirm the diagnosis of diabetes is indicated regardless of the initial test (eg, oral glucose tolerance test, fasting plasma glucose, or hemoglobin A1c).

Repeat testing is indicated in women who were screened with hemoglobin A1c in the first 6 months postpartum regardless of the result.

Applicable diagnosis codes - Z13.1, Z86.32, O99.815, R73.01, R73.02, R73.03, R73.09

Applicable procedure codes - 82946, 82947, 82948, 82950, 82951, 82952, 83036, 36415

Applicable revenue codes - 0300, 0301, 0309, 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

Page 30 of 58

#### Screening for Hearing Loss in Children- [Bright Future]

Screening for hearing loss is a covered service for:

- Newborn infants (typically administered during the initial hospital newborn care)
- Children and adolescents 0 to 18 years-Pure Tone audiometry and tympanometry
- Screening will be conducted using a one- or two-step validated screening

process Newborn infants age 28 days and under: 92558, 92587, 92588, 92650, 92651,

92652, 92653

Children and adolescents <u>0 to 18 years of age</u>: 92551, 92552, 92567 and V5008

Applicable ICD-10 diagnosis codes - Z00.110, Z00.111, Z01.10, Z01.118, Z13.5, Z82.2, Z00.121, Z00.129

Applicable procedure codes - V5008, 92551, 92552, 92567, 92558, 92650, 92651, 92652, 92653, 92587, 92588

Applicable revenue codes - 0471, 0470, 0479, 0770

#### Screening for Urinary Incontinence – [HRSA (2018)]

The Women's Preventive Services Initiative recommends screening women for urinary incontinence annually. Screening should ideally assess whether women experience urinary incontinence and whether it impacts their activities and quality of life. The Women's Preventive Services Initiative recommends referring women for further evaluation and treatment if indicated. The Women's Preventive Services Initiative recommends screening women for urinary incontinence as a preventive service. Factors associated with an increased risk for urinary incontinence include increasing parity, advancing age, and obesity; however, these factors should not be used to limit screening.

Several screening tools demonstrate fair to high accuracy in identifying urinary incontinence in women. Although minimum screening intervals are unknown, given the prevalence of urinary incontinence, the fact that many women do not volunteer symptoms, and the multiple, frequently changing risk factors associated with incontinence, it is reasonable to conduct annually

These services are considered included in the Annual Health Appraisal or Well Women Visit, and therefore not separately reimbursable.

Applicable ICD-10 diagnosis codes - None

Applicable procedure codes - None

Page 30 of 58

(This service would be included as part of the Annual Health Appraisal, or the Well Women visit)

# Sexually transmitted infections / diseases (STI / STD) Behavioral Counseling- [USPSTF (2014) (2020) & HRSA (2016) Bright Futures]

Behavioral counseling to prevent sexually transmitted infections is a covered service for patients who meet **any** of the following criteria:

- Sexually active adolescents (younger than age 25 years)
- Sexually active adults with **any** of the following:
  - o Current STIs
  - o STIs within the past year
  - o Multiple current sexual partners
  - o In non-monogamous relationships if they reside in a community with a high rate of STIs

Individuals being treated for sexually transmitted diseases may be more likely than others to engage in high-risk behavior.

Applicable ICD-10 diagnosis codes – Z00.00, Z00.01, Z00.121, Z00.129, Z01.411, Z01.419, Z11.3, Z11.4, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z70.8, Z72.51, Z72.52, Z72.53, Z72.89, Z77.21, Z77.9, Z86.19

Applicable procedure codes - 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, G0445

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Sexually transmitted infections/ diseases (STI/STD) behavioral counseling can also be included during the Annual Health Appraisal)

#### Skin Cancer Prevention: Behavioral Counseling- [USPSTF (2012) (2018)]

Behavioral counseling for young adults, adolescents, children, and parents of young children, about minimizing exposure to ultraviolet radiation to reduce risk for skin cancer is a covered service for patients with fair skin who meet any of the following criteria:

• Ages 6 months to age 24 years.

These services are considered inclusive in the preventive care visit, and therefore not separately reimbursable.

Applicable ICD-10 diagnosis codes - None

Applicable procedure codes - None

Page 30 of 58

# Statin Use for the Primary Prevention of Cardiovascular Disease in Adults: Prevention Medication (USPSTF (2016)]

Statin Use for the Primary Prevention of Cardiovascular Disease in Adults – The USPSTF recommends that adults without a history of cardiovascular disease (CVD) (ie, symptomatic coronary artery disease or ischemic stroke) use a low- to moderate-dose statin for the prevention of CVD events have 1 or more CVD risk factors (ie, dyslipidemia, diabetes, hypertension, or smoking); and 3) they have a calculated 10-year risk of a cardiovascular event of 10% or greater. Identification of dyslipidemia and calculation of 10-year CVD event risk requires universal lipids screening in adults aged 40 to 75 years.

(Statin medications are a pharmacy benefit)

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z01.411, Z01.419, Z13.220, Z13.6

Applicable procedure codes – 80061, 82465, 83718, 83719, 83721, 83722, 84478, 36415 (preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes -0300, 0301, 0309, 0770

# Syphilis Infection in Nonpregnant Adults and Adolescents, Pregnant Adults: Screening - [USPSTF (2016) Bright Future]

Screening for syphilis infection is a covered service for patients who meet **any** of the following criteria:

- Asymptomatic, nonpregnant adults and adolescents who are at increased risk for syphilis infection with any of the following risk factors:
  - Receives health care in a high-prevalence or high-risk clinical setting
  - o Men who have had sex with men
  - Men and women with HIV
  - o Commercial sex worker
  - Those in adult correctional facilities
  - Male younger than 29 years of age
- Pregnant individuals
  - o At first prenatal visit
  - Second screening during the third trimester for those who are in high-risk groups
  - o At delivery for those who are in high-risk groups

Applicable ICD-10 diagnosis codes – B20, Z00.00, Z00.01, Z00.121, Z00.129, Z01.411, Z01.419, Z01.42, Z11.2, Z11.3, Z11.8, Z11.9, Z20.2, Z21, Z72.51, Z72.52, Z72.53, and pregnancy diagnosis code (see list below)

Applicable procedure codes - 80055, 80081, 86592, 86593, 86780, 0064U, 0065U, 0210U, 36415

(Preventive benefits apply to 36415 when 36415 is billed with the applicable diagnosis and procedure codes)

Applicable revenue codes - 0300, 0302, 0306, 0309, 0310, 0390, 0770

# Tobacco Smoking Cessation in Adults, Including Pregnant Women: Interventions - [USPSTF (2015) (2021)]

Clinicians should ask all adults, including pregnant persons, about tobacco use, including ecigarettes, advise them to stop using tobacco, and provide behavioral interventions and US Food and Drug Administration approved pharmacotherapy for tobacco cessation for patients who meet **any** of the following:

- 12 Years of age or older
- Adults
- Pregnant women

As defined by the US Food and Drug Administration, tobacco products include any product made or derived from tobacco intended for human consumption (except products that meet the definition of drugs), including, but not limited to, cigarettes, cigars (including cigarillos and little cigars), dissolvables, hookah tobacco, nicotine gels, pipe tobacco, roll-your-own tobacco, smokeless tobacco products (including dip, snuff, snus, and chewing tobacco), vapes, electronic cigarettes (e-cigarettes), hookah pens, and other electronic nicotine delivery systems.

Applicable ICD-10 diagnosis codes – F17.200, F17.203, F17.208, F17.209, F17.210, F17.213, F17.218, F17.219, F17.220, F17.223, F17.228, F17.229, F17.290, F17.293, F17.298, F17.299, Z00.00, Z00.01, Z01.411, Z01.419, Z87.891, Z71.6, Z72.0, and pregnancy diagnosis code (see list below)

Applicable procedure codes - 99401, 99402, 99403, 99404, 99406, 99407

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

#### Tobacco Use in Children and Adolescents: Primary Care Interventions (USPSTF (2013) (2020))

Primary Care clinicians should provide interventions, including education or brief counseling, to prevent initiation of any tobacco use, including e-cigarettes, among school-aged children and adolescents, who have not started to use tobacco.

Ages 5 years up to 18 years of age

Applicable ICD -10 diagnosis codes: F17.200, F17.203, F17.208, F17.209, F17.210, F17.213, F17.218, F17.219, F17.220, F17.223, F17.228, F17.229, F17.290, F17.293, F17.298, F17.299, Z00.00, Z00.01, Z01.411, Z01.419, Z87.891, Z71.6, Z72.0

Applicable procedure codes - 99401, 99402, 99403, 99404, 99406, 99407

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

Page 30 of 58

#### Latent Tuberculosis Screening - [USPSTF (2016) & Bright Futures]

Screening for tuberculosis and latent tuberculosis infection (LTBI) is a covered service for patients at increased risk who meet any of the following criteria:

- Asymptomatic adults at increased risk for infection for LTBI
- Risk assessments at preventive health visits
- Testing if risk identified for all ages

Applicable ICD-10 diagnosis codes - Z00.00, Z00.01, Z00.121, Z00.129, Z11.1, Z11.7, Z22.7, Z86.15

Applicable procedure codes - [86480 and 86481 applicable to adults only], 86580, 99211

Applicable revenue codes - 0300, 0302, 0309, 0510, 0511, 0512, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0529, 0770

#### Unhealthy Drug Use: Screening [USPSTF (2020)]

Screening for unhealthy drug use, should be by asking questions, in adults age 18 years or older, including pregnant adults, age 12 and older.

Screening should be implemented when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred.

"Unhealthy drug use" is defined as the use of substances (not including alcohol or tobacco products) that are illegally obtained or the nonmedical use of prescription psychoactive medication; that is, use of medications for reasons, for duration, in amounts, or with frequency other than prescribed or by persons other than the prescribed individual.

The screening is a covered service for patients who meet any of the following:

- 18 years of age and older
- Pregnant and postpartum adults (age 12 and older)

Applicable ICD-10 diagnosis codes –Z00.00, Z00.01, Z01.411, Z01.419, Z71.51, O99.320, O99.321, O99.322, O99.323, O99.325

Applicable procedure codes - 99401, 99402, 99403, 99404, 99408, 99409

Applicable revenue codes - 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Screening for unhealth drug use can also be included during the Annual Health Appraisal)

Page 30 of 58

Visual in Children: Screening- [USPSTF (2008) & Bright Futures]

Vision screening to detect the presence of amblyopia or its risk factors is a covered service for children who meet the following criteria:

- 3 to 18 years of age
- Risk assessments at preventive health visits

Applicable ICD-10 diagnosis codes – Z00.110, Z00.111, Z01.00, Z01.01, Z01.020, Z01.021, Z00.121, Z00.129, Z13.5, Z76.1, Z76.2, H53.001, H53.002, H53.003, H53.009

Applicable procedure codes -99173, 99174, 99177

Applicable revenue codes - 0510, 0515, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Vision Screening can also be included during the Annual Health Appraisal)

# Weight Loss to Prevent Obesity-Related Morbidity and Mortality in Adults: Behavioral Interventions

- [USPSTF (2018)]

Clinicians should offer or refer adults with a body mass index (BMI) of 30 kg/m2 or higher to intensive, multi-component behavioral interventions.

Screening for obesity is a covered service for:

All adults – age 18 and older

Applicable ICD-10 diagnosis codes – E66.01, E66.09, E66.1, E66.2, E66.8, E66.9, O99.210, O99.211, O99.212, O99.213, Z68.30, Z68.31, Z68.32, Z68.33, Z68.34, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45

Applicable procedure codes – 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, G0447, G0473

Applicable revenue codes - 0510, 0514, 0517, 0519, 0520, 0521, 0523, 0529, 0770

(Weight loss to prevent obesity-related morbidity and mortality in adults screening can also be included during annual health appraisal)

\*\*\*Reflects additional state requirements for covered services.

Page 30 of 58

## **Policy Guidelines**

The appropriate preventive service codes should be billed when preventive services are performed. Unless limitations are noted above, services are available as appropriate.

Over the counter (OTC) medications are not a covered benefit.

The AMA/CPT has created Modifier 33 for preventive services. BSC recognizes this modifier for claims billed for preventive services as outlined in this policy and will process accordingly.

Effective for claims with dates of service on or after January 1, 2018, prolonged preventive services will be payable by Blue Shield when billed as an add-on to an applicable preventive service, and both deductible and coinsurance do not apply.

Blue Shield will apply correct coding rules from industry standard sources such as; Center for Medicare & Medicaid Services (CMS) and American Medical Association (AMA), to the claims adjudication process.

## **Medical Policy Application**

For most services, a medical necessity determination by Blue Shield according to medical policy is not required. The services that require determination of medical necessity are noted in the Policy Section above.

#### Rationale & References

Covered preventive health services are based on the recommendations of:

- The United States Preventive Services Task Force (USPSTF) in "The Guide to Clinical Preventive Services". <a href="http://www.ahrq.gov/clinic/uspstfix.htm#pocket">http://www.ahrq.gov/clinic/uspstfix.htm#pocket</a>
- The U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA) comprehensive guidelines. https://www.hrsa.gov/womensquidelines2016/index.html
- The Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC). http://www.cdc.gov/vaccines/acip/index.html
- The U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA) comprehensive guidelines for infants, children, adolescents, and women. http://mchb.hrsa.gov/
- USPSTF Published Recommendations, Index: <a href="http://www.uspreventiveservicestaskforce.org/BrowseRec/Index/browserecommendations">http://www.uspreventiveservicestaskforce.org/BrowseRec/Index/browserecommendations</a>
- American Academy of Pediatrics / Bright Futures / Recommendations for Pediatric Preventive Healthcare. (For ages 0 – 21):https://brightfutures.aap.org/materials-andtools/PerfPrevServ/Pages/default.aspx

Page 31 of 58

# **Policy History**

This section provides a chronological history of the activities, updates and changes that have occurred with this Benefit Policy.

Effective Date	Action	Reason
10/01/2010	New Policy Adoption	Preventive Health Guidelines
01/01/2011	Coding Update	Administrative Review
02/22/2011	Criteria Revised to Align with USPSTF recommendations	Administrative Review
05/25/2011	Coding Update	Administrative Review
07/01/2011	Coding Update	Administrative Review
07/22/2011	Coding Update	Administrative Review
09/01/2011	Criteria Revised to Align With USPSTF recommendations	Administrative Review
01/06/2012	Criteria Revised to Align With USPSTF recommendations	Administrative Review
07/01/2012	Clarification of effective date	Administrative Review
07/17/2012	Criteria Revised to Align With USPSTF recommendations	Administrative Review
08/01/2012	Criteria Revised to Align With USPSTF recommendations	Administrative Review
10/31/2012	Criteria Revised to Align With USPSTF recommendations, coding update	Administrative Review
03/01/2013	Added link for ACIP guidelines	Administrative Review
06/15/2013	Coding Update	Administrative Review
09/01/2013	Criteria Revised to Align With USPSTF recommendations, coding update	Administrative Review
01/01/2014	Coding Update	Administrative Review
03/01/2014	Coding Update	Administrative Review
04/11/2014	Coding Update	Administrative Review

Page 32 of 58

05/01/2014	Coding Update	Administrative Review
07/15/2014	Coding Update	Administrative Review
09/30/2014	Coding Update	Administrative Review
	I	I
01/15/2015	Criteria added for Aspirin and CVD Risk Factors to Align with USPSTF, coding update	Administrative Review
04/30/2015	ICD-10 codes added in the policy, & 2015 code updates	Administrative Review
05/08/2015	ICD-9 and ICD-10 codes updated for "Behavioral Counseling for Prevention of CVD"	Administrative Review
08/19/2015	Aligned the policy in accordance with USPSTF Preventive Benefits Changed title from "Preventive Health Services Including Women's Preventive" Explained age criteria for Developmental Screening Added 2016 New Code 0403T to Behavioral Counseling for CVD	Administrative Review
10/30/2015	Added G0464 to Colorectal Cancer Screening Added 11982 and 11983 to Contraception Added 36415 to HPV Screening	Administrative Review

Page 33 of 58			
Effective	Action	Reason	
<b>Date</b> 03/01/2016	Anomia Addad 90091	Administrative Poview	
03/01/2016	Anemia – Added 80081 BRCA Mutation – Added 81162	Administrative Review	
	Colorectal CA Screening - Replaced G0464 with 81528		
	Contraception - Added J7297, J7298 and removed		
	J7302.		
	Diabetes Mellitus - Added 83036, ICD-9 Dx		
	(278.00, 278.01, 278.02, 278.03), and ICD-10		
	Dx (E66.01, E66.09, E66.1, E66.2, E66.3, E66.8,		
	E66.9)		
	Gestational DM - Added 83036 Hepatitis B (Pregnant) - Added 80081		
	HIV - Added 80081 and G0475		
	HPV - Added G0476		
	Lung Cancer Screening - Added G0296,		
	G0297 and V15.82		
	Rh (D) - Added 80081		
	Syphilis - Added 80081		
	Visual Impairment – Added 99177		
	Immunizations - Removed 90645, 90646,		
	90669, 90703, 90704, 90705, 90706, 90708,		
	90712, 90719, 90720, 90721		
04/01/2016	Annual Health Appraisal – Updated Dx	Administrative Review	
	V19.2		
	Autism: Changed Age criteria to 18 and 30 months		
	Behavioral counseling for prevention of CVD: ICD-10		
	codes and CPT codes updated		
	Breastfeeding: E0604 removed from coverage as		
	preventive		
	Colorectal CA Screening - Added 45349,		
	45390 and Dx codes Z80.0, Z83.71, Z83.79,		
	Z85.038, Z86.010		
	Contraception – Removed A4264		
	Diabetes: Added 82950 and 82951		
	Tuberculosis: Removed children as criteria		
	Pregnancy diagnosis code table added: Applies to Anemia screening,		
	Applies to Ariernia screening, Asymptomatic bacteriuria, Chlamydia infection,		
	Syphilis, Gonorrhea, gestational diabetes, Hepatitis B		
	virus, Rh (D) incompatibility Screening		
	Diabetes Diagnosis code Table added:		
	Applies to Behavioral counseling for CVD		
	Atherosclerosis diagnosis code table added: Applies		
	to Behavioral counseling for CVD Lung Cancer: S8032 Removed effective 09.30.2016.		
	Syphilis Screening: ICD-10 code updates Tobacco		
	Cessation: Updated guideline for 2015.		
	Sexually Transmitted Infection: ICD-10 Code updates		

Page 34 of 58

Pregnancy Diagnosis Table: ICD-10 Code updates Diabetes Diagnosis Table: ICD-10 code updates Immunizations - Added 90674, 90682, 90750 effective 01.01.2017	

# 07/01/2017 Aspirin Use to Prevent Cardiovascular Administrative Review Disease and Colorectal Cancer: Preventive Medication - NEW USPSTF recommendation for aspirin use in adults 50-59 years with risk factors such as CVD or CRC Colorectal Cancer Screening: G0464, 81528 applicable to all LOBs. Chlamydia Screening - Added ICD-10 code updates Gonorrhea Screening- Added ICD-10 code updates Hepatitis C Screening - Added ICD-10 code updates HIV Screening - Added ICD-10 code updates Syphilis Screening - NEW USPSTF recommendation for asymptomatic, nonpregnant adults and adolescents who are at increased risk for syphilis infection Tuberculosis Screening: NEW USPSTF recommendation for latent tuberculosis infection in population at increased risk

Page 35 of 58

	Behavioral Counseling for CVD: ICD-10 codes removed. Breast Cancer Mammogram: Updated verbiage for code 77063 as applicable to all LOBs Breastfeeding: Updated verbiage for code E0604 not covered. Cervical Cancer screening: Changed intervals for the cervical cancer screening codes. Colorectal Cancer Screening: Added codes 88304 and 88305. Code 81528 applicable to all LOBs. Updated verbiage for DNA stool testing every 3 years. G0464 expired. Domestic and Interpersonal Violence: Updated verbiage to apply to women only. Updated diagnosis coding for women. Latent Tuberculosis screening: Age criteria added and guideline changes. Immunization: 90653 is approved by FDA. Asterisk removed.	
10/01/2017	Alcohol misuse: ICD-10 code updates. Contraception: Q9984 added. Domestic and Interpersonal Violence Screening: Added 90791 and 90792 codes due to Mental Health Office visits addition to updated HRSA guidelines for women.	Administrative Review
	Annual Health Appraisal: ICD-10 code updates. Interval changes for annual exams. Dental Carries: ICD-10 code updates. Pregnancy Diagnosis Table: ICD-10 code updates. Diabetes Diagnosis Table: ICD-10 code updates.	

Page 36 of 58

01/01/2018	Breast Cancer Mammogram: G0202 expired. Contraception: J7296 added. Colorectal Cancer Screening: 00810 expired, 00811 and 00812 added Lead Screening: Age criteria and diagnosis codes updated Annual Health Appraisal: 99401, 99402, 99403, 99404, 99411, 99412 added Behavioral Counseling Interventions - CVD: Age criteria added. ICD-10 code added back to Policy which got omitted in last update. USPSTF ACIP: 90756 added Add-on Codes: G0513 and G0514 added.	Administrative Review
04/01/2018	Contraception: Q9984 removed. USPSTF ACIP: 90739 and 90750 are FDA approved now.	Administrative Review
07/01/2018	Pre-Eclampsia Screening-new requirement. USPSTF-screening using blood pressure measurement throughout prenatal visits	Administrative Review
7/1/2018	Skin Cancer-Behavioral Counseling: Age criteria updated (6months to 24 years) Immunization appendix: 90682 is FDA approved now. * removed from code in table Immunization: Link updated Fall Prevention: Removed Vitamin D supplementation language per USPTF	Administrative Review
7/11/2018	Breast Pump—remove home grown code of Z0012	Administrative Review
10/1/2018	Cervical Cancer Screen—remove 88154 (deleted 1/1/2018) Behavioral Counseling for Prevention of CVD— Remove G0447-not appropriate for this benefit Obesity Screening—Removed G0446 Breastfeeding Counseling-Remove Homegrown code of Z0012 Colorectal Screening-added G0500, 00813, 99152, 99153	Administrative Review

Page 37 of 58

	Hepatitis B-Pregnant-Added 86704, 86705, 86706 Depression-Added Dx Codes-Z13.31 Autism-Added DX code Z13.41 Domestic and Interpersonal Violence-Added Z04.81 Pregnancy Diagnosis Table: ICD-10 code updates.	
01/01/2019	Asymptomatic Bacteriuria—CPT Code 36415 was removed-not appropriate for this benefit Autism—CPT code 99381 and 99391 were removed—not appropriate for this benefit BRCA Mutation Testing—CPT codes 81211, 81213, 81214 removed-deleted as of 1/1/2019. CPT codes 81163, 81164, 81165, 81166, 81167 added-new codes. Cervical Cancer (Pap smear) Screen—New language added to benefit-age criteria broken into 2 different age groups. New ICD-10 codes added Z12.72, Z12.79, Z12.89, Z72.51, Z72.52, Z72.53, Z77.21, Z77.29, Z91.89, Z92.89. New CPT code added-87624. New HCPCS code added-G0476. New Revenue Codes added—0300, 0301, 0306 Chlamydia (STD) Infection—CPT code 36415 removed-not appropriate for benefit Gonorrhea (STD)—CPT code 36415 removed-not appropriate for benefit Lipid Disorders—New ICD-10 code Z13.6 added. New CPT code 83722 added Osteoporosis Screening—CPT code updates.	Administrative Review

Page 38 of 58

## 05/01/2019 Annual Health Appraisal-Added language to reflect Administrative Review hearing loss in adults. Added age parameters of 3 years of age, for 99173. Removed G0402, 99172, 99497, 99498, , 92558-these codes are not appropriate for category. 92551, 92552, 92553—age updated to reflect 18 years and older. Added-revenue code 0770 Abdominal Aortic Aneurysm—title updated to include screening. Added revenue code 0770 Alcohol Use—title update to "Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions. Updated age to reflect 12 years and older, instead of 18. Removed Z13.89. Added G2011-new code Anemia-updated words "21 years of age". Added 85013-new code Aspirin-title updated "Aspirin Use to Prevent CVD and Colorectal Cancer: Preventive Medication". Language updated to reflect USPSTF language. Removed the pregnancy language-moved to new Pre-eclampsia category Asymptomatic Bacteriuria-title updated to include "in Adults". Added language to reflect "Pregnant adolescents ages 12 years and older" Autism-updated age to reflect 0 to 3 years of age (instead of months). Added language for screening at 9 months and 18 months visits. Removed CPT codes 99382 and 99392-not appropriate. Added CPT code 96110 Behavioral Counseling for Preventive of CVD-title updated to "Healthful Diet and Physical Activity for Cardiovascular Disease preventive in Adults with Cardiovascular Risk Factors: Behavioral Counseling". Removed G0270, G0271, 0403T, S9470-not appropriate. Remove rev codes 0914, 0915, 0916-not appropriate Blood Pressure-title updated to include "High Blood Pressure Screening-in Adults". Removed revenue codes 0480, 0920, 0969, 0983 Breast Cancer Mammogram-title updated to include "Breast Cancer Screening: Mammogram". Breastfeeding-language updated to reflect "Lactation support services are inclusive in maternal care visits and annual health appraisal. Removed listed ICD-10 DX codes-updated to reflect "ALL" DX codes. Removed 99201,99202, 99203, 99204, 99205,

99211, 99212, 99213, 99214, 99215, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403,

99404, 99411, 99412-not appropriate. Removed revenue codes 0271, 0272-not appropriate BRCA Mutation Testing—title update to include "BRCA-Related Cancer: Risk Assessment, Genetic counseling, and Genetic Testing. Language updated to reflect USPSTF language. CPT codes 81432 and 81433 added-new codes.

Chemoprevention of Breast Cancer-title updated to "Breast Cancer: Medications for Risk Reduction".

Language updated to reflect USPSTF language.

Chlamydia (STD) Infection-added "years" to age 24.

Add asymptomatic to sexually active, per USPSTF and added "years" to age 25.

Cervical Cancer (Pap Smear) Screen-title updated to "Cervical Cancer (Pap smear) Screen, including Human Papillomavirus (HPV) Screening. Combined the criteria of both cervical cancer and HPV-into one category.

Colorectal Cancer-removed CPT code 88304-not appropriate.

Contraception-updated reproductive capacity language "Adolescents and adult). Updated contraceptive care language to reflect USPSTF language.

Depression-added new language regarding perinatal depression to reflect USPSTF language.

Abnormal Blood Glucose and DM Screening-removed the 18 years of age criteria and DX codes—not appropriate. Removed 83036 with DX Z00.00, Z00.01, Z01.411, Z01.419, Z13.1

Domestic and Interpersonal Violence-title updated to "Intimate Partner Violence, Elder Abuse, and Abuse of Vulnerable Adults Screening". Added language that these services will pertain to individuals 12 years and older. Added DX codes Z69.010, Z69.81. Removed CPT code 90792, 97802, 97803, 97804, G0270, and G0271-not appropriate.

Fall Prevention-updated language to reflect exercise interventions. Removed physical therapy language. Gestational Diabetes-added language to reflect Asymptomatic pregnant individuals. Added language to reflect 2 screenings per pregnancy. Gonorrhea-added language to reflect asymptomatic individuals.

Gonococcal Ophthalmia Neonatorum-title updated to reflect "Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum: Preventive Medication.

Page 40 of 58

Language updated to reflect "For prevent" and removed "for".

Hear loss—title updated to reflect "Screening for Hearing Loss in Children", per USPSTF. Added language under newborn-typically administered during the initial hospital newborn care. Added language-children and adolescents 0 to 18 years-Pure tone audiometry and tympanometry. Added DX codes Z82.2, Z00.121, Z00.129. Added CPT codes 92552 and 92567.

Hepatitis B Virus-Added G0499 and revenue code 0770.

Hepatitis C Virus-Language updated to reflect "This is a one-time screening, for adults born between 1945 and 1965. Added revenue code 0770. Removed revenue codes 096X, 097X, 098X.

Human Immunodeficiency Virus (HIV)-Language added to reflect "Pregnant individuals, including women who present in labor and are untested". Remove DX code Z71.7-not appropriate. Revenue code added-0770

Lipid Disorder-removed ICD-10 DX codes and CPT procedure, and revenue codes (category inactive by USPSTF 2008).

Lung Cancer-removed procedure codes 0174T, 0175T, 71250, 71260, 71270, S8092-not appropriate.

Obesity Screening-title updated to reflect "Obesity in Children and Adolescents: Screening". Removed the adult criteria and formed a new category per USPSTF. Language updated to reflect "Screening for obesity in children and adolescents". Removed DX codes-Z00.00, Z00.01, Z01.411, Z01.419, Z01.42—not appropriate for children. Removed 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, G0473-not appropriate

Osteoporosis Screening-language changed from "less" to "younger" for age 65. Revenue code 0770 added. Added CPT codes 78350 and 78351. PKU-Added CPT code 36416

New Category-Pre-Eclampsia: Screening. Created new category to separate the information on pre-eclampsia from high blood pressure-Per USPSTF recommendation. No new information added. Sexually transmitted infections/disease-title updated to reflect "STI/STF Behavioral counseling. Added language to reflect "adolescents (younger than age 25 years). Removed DX code Z71.7-not appropriate.

Page 41 of 58

Skin Cancer-title updated to reflect "Skin Cancer Prevention: Behavioral Counseling". Language added to reflect "young adults, adolescents, children, and parents of young children". Updated language to reflect "24 years".

Syphilis Screening-removed CPT codes 87205, 87210, 87800, and 87801-not appropriate.

Tobacco Screening-title updated to reflect "Tobacco Smoking Cessation in Adults, Including Pregnant Women: Behavioral and Pharmacotherapy Interventions". Updated language to reflect USPSTF language. Removed DX codes F17.201, F17.211, F17.221, F17.291, Z13.83-not appropriate. Tobacco Use in Children and Adolescents-split tobacco into Adults and Children. Added the language to Children section, added DX codes and procedure codes.

Tuberculosis Screening-title updated to reflect "Latent Tuberculosis Screening". Removed DX codes R76.11, R76.12-not appropriate. Remove CPT code 36415-not appropriate. Removed revenue codes-not appropriate

Visual Impairment-change the age parameters to 3 to 18 years. Added DX codes Z76.1, Z76.2. Remove CPT code 99172, 99381, 99382, 99391, 99392.

New Category—Weight Loss to Prevent Obesity-Related Morbidity and Mortality in Adults: Behavioral Interventions. No new information added-just split obesity category into separate categories per USPSTF recommendations.

07/01/2019

Fall Prevention-added CPT codes 97110, 97112, 97113, 97116, 97150, 97161, 97162, 97163, 97164, 97530, G0151, G0157, G0159, S8990,

S9131

Newborn Screening Panel-new category. Added language to reflect HRSA requirements—no coding work BRCA-Added 0102U and 0103U-new codes effective July 1, 2019 Administrative Review

Page 42 of 58

8/15/2020	Appual Health Appraired Demove CDT and an	Administrative Poview
0/13/2020	Annual Health Appraisal-Remove CPT codes 92551, 92552, 92553, 92558, 99497, 99498,	Administrative Review
	(G0101, G0438, G0439-not commercial	
	related-MCR)	
	Unhealthy Alcohol Use-Remove DX code	
	Z71.42. Remove CPT codes 99384, 99385,	
	99386, 99387, 99394, 99395, 99396, 99397	
	Autism Screening-Removed DX code F84.0,	
	F84.9, and Z13.89.	
	Healthful Diet/CVD Prevention- Removed DX	
	code Z13.220, Z71.3, Z72.4, Z87.891.	
	BRCA-Removed DX code Z71.83, not	
	appropriate.	
	Cervical CA-Removed DX code Z12.79 and	
	Z12.89. Removed CPT code 88155. Removed	
	several DX/CPT combinations-not appropriate	
	combinations.	
	Chlamydia and Gonorrhea-Removed CPT	
	codes 86631, 86632, 87081, 87800, 87801, 36415. Removed Revenue code 0302.	
	Colorectal Cancer- Removed CPT code	
	45334, 45340, 45341, 45342, 45346, 45347,	
	45349, 45379, 45382, 45386, 45388, 45389,	
	45390, 45391, 45392, 88304.	
	Dental caries-Removed DX code Z41.8,	
	Z00.121, and Z00.129.	
	Depression- Removed CPT code 99401, 99402,	
	99403, 99404.	
	Development/Behavioral Disabilities- Removed	
	CPT code 96127.	
	Diabetes Mellitus Type 2- Removed DX code	
	E66.01, E66.09, E66.1, E66.2, E66.3, E66.8, E66.9.	
	Removed CPT code 82948, 82950, 82951,	
	82952.	
	Hepatitis C-Updated language to reflect USPSTF recommendations. Removed DX	
	codes-not needed as qualifier. Removed	
	Revenue Code 0390.	
	High Blood Pressure-Removed R03.0	
	Human Immunodeficiency (HIV)-Removed DX	
	code Z11.9 and Z77.21.	
	Intimate Partner Violence, Abuse-Removed DX	
	code Z04.81 and Z69.010.	
	Obesity in Children- Removed DX code Z71.3.	
	Osteoporosis- Removed CPT code G0130.	
	Syphilis Screening-Removed CPT 87081	

Page 43 of 58

	Pregnancy DX Table-Removed several DX codes.	
11/7/2020	Unhealthy Alcohol use in Adults-Added Rev codes 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529.  Adolescent Alcohol and SubstanceUse-Added Rev codes 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529.  Asymptomatic Bacteriuria-Added Rev codes 0307.  Breastfeeding-Added HCPCS code K1005.  BRCA-Added CPT code 0138U.  Breast Cancer-Meds—Removed DX code Z85.3.  Chlamydia (STD)-Added CPT code 87563.  Colorectal CA-Added DX codes K51.40, K62.0, K62.1, added CPT code 74280.  Depression-Adjusted language to align better with USPSTF recommendation (No code changes)  Diabetes Mellitus-Added DX codes Z86.32, E28.2  Hepatitis B-Added DX code Z11.3  Hepatitis C-Updated language to align with the USPSTF recommendation. Removed all DX codes (Z00.00, Z00.01, Z01.411, Z01.419, Z20.5, Z72.89, Z77.21, and Preg)-test is now open to anyone age 18 to 79.  High Blood Pressure-Added CPT codes 99473, 99474  HIV-Removed DX code Z77.21-not appropriate.  Added CPT code 99401, 99402, 99403, 99404.  Updated language to align with USPSTF recommendation.  Intimate Partner Violence-Removed DX code Z69.010  STI/STD- Added Rev codes 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529  Tobacco in Adults—Added DX codes Z71.6, O99.330, O99.331, O99.332, O99.333. Added Rev codes 0510, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0523, 0529.	Administrative Review

	Tobacco in Children and Adolescents-Added DX code Z71.6. Added Rev codes 0510, 0514, 0515, 0517, 0519, 0520, 0521, 0523, 0529. Tuberculosis-Added Rev code 0519. Unhealthy Drug Use: Screening-New Category-Effective June 2020—Added language, Added DX codes, Added CPT codes, Added Rev codes. Visual Impairment-Added DX codes H53.001, H53.002, H53.003, H53.009.	
8/21/ 2021	Annual Health Appraisal-Added HCPCS code G0101 Abnormal Blood Glucose and DM Type 2 Screening-combined the criteria into one category per Task Force (breakout of criteria from Healthful Diet category). Updated the DX codes and CPT codes. Added CPT codes 0403T & 0488T. Removed CPT codes 97801, 97802, 97803-placed these codes under Healthful Diet category. Unhealthy Alcohol Use Adults-Added revenue codes 0510, 0514, 0515, 0517, 0519, 0521, 0523, 0529 Adolescents Alcohol and Substance Use: Screening-Added DX codes F11.10, F11.20, F12.10, F12.20, F12.90, F14.10, F14.20, F18.10, F18.90, F19.10, F19.20, F55.8, to align with Bright Future. HPV Screening-Added CPT code 0500T. Cervical CA Screening/HPV Screening-updated age range to reflect 21-999 yrs for G0476. Contraception-Removed Rev codes 0450, 0451, 0452, 0456, 0459, 0516, 0526 from several CPT codes as the procedures were not removal of contraception. Colorectal CA Screening—Added CPT 74280, Modifier 33 to cpt code 82274, updated the intervals for 00811, 00812, 00813, 45330, 45331, 45332, 45333, 45335, 45338, 45378, 45380, 45381, 45384, 45385, 88305, 99152, 99153, J0300, J2175, J2180, J2250, J2704, J3010, J3360, G0105, G0500, S0285, Removed Rev code 0514 (not appropriate), Depression-Removed DX code Z13.89 (too vague), added language for 96127 to reflect	Administrative Review

Page 45 of 58

Z13.31, Z13.32, & Z13.39 only allowable codes for 96127. Dental Caries/Oral Fluoride-added Dx Codes Z29.3, Z91.841, Z91.842, Z91.843, Z91.849 based on Bright Futures guidelines Fall Prevention-Added Rev Codes 0424, 0510, 0517, 0519, 0520, 0521, 0523, 0529. Healthful Diet to Prevent CVD-updated the Task language to reflect Force recommendations (breakout of criteria involving DM Type 2 and Weight Loss Adults). Removed several DX codes (E66.01, E66.09, E66.1, E66.2, E66.3, E66.8, E66.9, F17.200, F17.201, F17.203, F17.208, F17.209, F17.210, F17.211, F17.213, F17.218, F17.219, F17.220, F17.221, F17.223, F17.228, F17.229, F17.290, F17.291, F17.293, I25.10, I25.110, I25.111, I25.118, I25.119, 125.700, 125.701, 125.708, 125.709, 125.710, 125.711, 125.718, 125.719, 125.720, 125.721, 125.728, 125.729, 125.730, 125.731, 125.738, 125.739, 125.750, 125.751, 125.758, 125.759, 125.760, 125.761, 125.768, 125.769, 125.790, 125.791, 125.798, 125.799, 125.810, 125.811, 125.812, N262., O10.02, O10.03, O10.12, O10.13, O10.22, O10.23, O10.32, O10.33, O10.42, O10.43, O10.92, O10.93, O24.419, O24.429, O24.439, O99.810, O99.814, O99.815, R73.01, R73.02, R73.03, R73.09, R73.9, Z68.25, Z68.26, Z68.27, Z68.28, Z68.29, Z68.30, Z68.31, Z68.32, Z68.33, Z68.34, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, Z72.0, Z86.32) and CPT codes (G0447, G0473, 0403T, 0488T). Added language to reflect that DX codes E78.2, E78.3, E78.41, E78.49, E78.5, E78.6 & E88.81 are the only allowable DX codes for 97802, 97803 & 97804. Added Rev Codes 0520, 0521, 0523, 0529. Updated age to reflect 18 to 999 yrs to align with task force age range change. Hepatitis C Virus-Added DX codes Z00.00 & Z00.01. Removed Dx Code N/A. High Blood Pressure Screening-Removed DX codes Z00.00 & Z00.01. Added DX code R03.0. Lung Cancer-Added new CPT code 71271, removed G0297 (deleted 1/2021) Obesity in Children and Adolescents-Removed DX code Z13.89-too vague

	Osteoporosis Screening-Added CPT codes	
	0554T, 0555T, 0556T, 0557T.	
	Prostate CA Screening-updated age range to	
	reflect 40-999 yrs	
	Tobacco Use in Children-updated age to	
	reflect 5 to 999 yrs.	
	Weight Loss Adults-Updated the language to	
	reflect Task Force recommendations (breakout	
	of criteria from Healthful Diet category).	
	Updated the age to reflect 18 and older.	
	Added several DX codes (E66.01, E66.09, E66.1,	
	E66.2, E66.8, E66.9, O99.210, O99.211, O99.212,	
	O99.213, Z68.30, Z68.31, Z68.32, Z68.33, Z68.34,	
	Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41,	
	Z68.42, Z68.43, Z68.44, Z68.45) and CPT codes	
	(99385, 99386, 99387, 99395, 99396, 99397,	
	99401, 99402, 99403, 99404, 99411, 99412,	
	G0447, G0473) to reflect new criteria. Added	
	Rev Codes 0510, 0514, 0517, 0519, 0520, 0521,	
	0523, 0529. Updated age range to reflect 18 -	
	999 yrs based on the code changes-criteria	
	change by task force.	
	Immunizations-Added CPT codes 90476, 90477,	
	90667, 90689, 90694	
	70007, 70007, 70074	
1/1/2022	Consider Cancer/HDV Screening Added DV	Administrativo Poviow
1/1/2022	Cervical Cancer/HPV Screening- Added DX	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4,	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6,	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9,	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4,	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4,	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3,	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to 999 years for pregnant criteria	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to 999 years for pregnant criteria  Preventive Human Immunodeficiency Virus	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to 999 years for pregnant criteria  Preventive Human Immunodeficiency Virus (PrEP) – adding the counseling CPT codes and	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to 999 years for pregnant criteria  Preventive Human Immunodeficiency Virus (PrEP) – adding the counseling CPT codes and language	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to 999 years for pregnant criteria  Preventive Human Immunodeficiency Virus (PrEP) – adding the counseling CPT codes and language  Sexually transmitted infection/disease – Added	Administrative Review
1/1/2022	codes Z00.121, Z00.129, Z01.42, Z11.3, Z11.4, Z11.51, Z11.59, Z11.8, Z11.9, Z20.2, Z20.5, Z20.6, Z20.9, Z57.8, Z71.7, Z72.89, Z77.21, Z77.9, updated the intervals to once every three years.  COVID-19 – expanded the language to reflect the vaccinations, counseling, and immunization coverage.  Hepatitis B Screening – Added DX codes Z11.4, Z20.2, Z72.05 to Non-Pregnant criteria  Hepatitis C Screening – Added DX codes Z11.3, Z20.2, Z20.6, Z72.51, Z72.52, Z72.53  Human Immunodeficiency Virus – Added DX code Z77.21, moved the counseling language and CPT codes to the PrEP category, removed DX codes Z22.8, Z22.9, Z71.89-not appropriate for category, updated age range to reflect 0 to 999 years non-pregnant, updated age 12 to 999 years for pregnant criteria  Preventive Human Immunodeficiency Virus (PrEP) – adding the counseling CPT codes and language	Administrative Review

# 1B Preventive Health Services [Post USPSTF (Including Women's Preventive)] Page 47 of 58 The materials provided to you are guidelines used by this plan to authorize, modify, or deny care for persons with similar illness or conditions. Specific care and treatment may vary depending on individual need and the benefits covered under your contract. These Policies are subject to change as new information becomes available.

#### **Pregnancy Diagnosis Table**

The following Pregnancy Diagnosis Codes are required where indicated in the Preventive Care Services table (above):

#### **ICD-10** Codes

O00.00,O00.01, O00.101, O00.102, O00.109, O00.111, O00.112, O00.119, O00.201, O00.202, O00.209, O00.211, O00.212, O00.219, O00.80, O00.81, O00.90, O00.91, O02.81, O09.00, 009.01, 009.02, 009.03, 009.10, 009.11, 009.12, 009.13, 009.211, 009.212, 009.213, O09.219, O09.291, O09.292, O09.293, O09.299, O09.30, O09.31, O09.32, O09.33, O09.40, O09.41, O09.42, O09.43, O09.511, O09.512, O09.513, O09.519, O09.521, O09.522, O09.523, 009.529, 009.611, 009.612, 009.613, 009.619, 009.621, 009.622, 009.623, 009.629, 009.70, 009.71, 009.72, 009.73, 009.811, 009.812, 009.813, 009.819, 009.821, 009.822, 009.823, 009.829, 009.821, 009.822, 009.823, 009.829, 009.891, 009.892, 009.893, O09.899, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, O10.011, O10.012, O10.013, O10.019, , O10.111, O10.112, O10.113, O10.119, , O10.211, O10.212, 010.213, 010.219, 010.311, 010.312, 010.313, 010.319, 010.411, 010.412, 010.413, O10.419, O10.911, O10.912, O10.913, O10.919, O11.1, O11.2, O11.3, O11.9, O12.00, O12.01, O12.02, O12.03, O12.10, O12.11, O12.12, 012.13, 012.20, 012.21, 012.22, 012.23, 013.1, 013.2, 013.3, 013.4, 013.9, 014.00, O14.02, O14.03,

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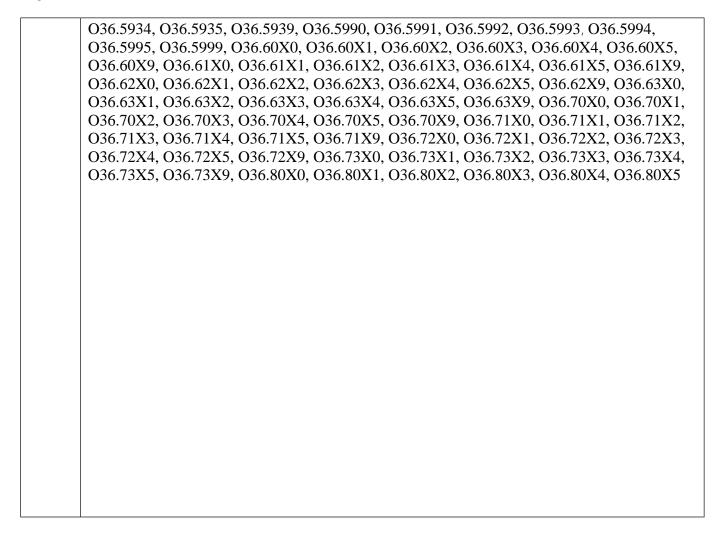
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Page 50 of 58

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Page 50 of 58



Page 51 of 58

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Page 52 of 58

```
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Z36.8A, Z36.9,
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#### Perinatal Depression Diagnosis Table

The following Perinatal Depression Diagnosis Codes are required where indicated in the Preventive Care Services table (above):

#### ICD-10 Codes

O00.00, O00.01, O00.101, O00.102, O00.109, O00.111, O00.112, O00.119, O00.201, O00.202, O00.209, O00.211, O00.212, O00.219, O00.80, O00.81, O00.90, O00.91, O02.81, O02.89, O02.9, O07.0, O07.1, O07.2, O07.30, O07.32, O07.33, O07.34, O07.35, O07.38, O07.39, O07.4, O08.0, O08.1, O08.2, O08.3, O08.4, O08.5, O08.6, O08.7, O08.82, O08.83, 008.89, 008.9, 009.00, 009.01, 009.02, 009.03, 009.10, 009.11, 009.12, 009.13, O09.211, O09.212, O09.213, O09.219, O09.291, O09.292, O09.293, O09.299, O09.30, O09.31, O09.32, O09.33, O09.40, O09.41, O09.42, O09.43, O09.511, O09.512, O09.513, O09.519, O09.521, O09.522, O09.523, O09.529, O09.611, O09.612, O09.613, O09.619, O09.621, O09.622, O09.623, O09.629, O09.70, O09.71, O09.72, O09.73, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O09.891, O09.892, O09.893, O09.899, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, O10.011, O10.012, O10.013, O10.019, O10.02, O10.03, O10.111, O10.112, O10.113, O10.119, O10.12, O10.13, O10.211, O10.212, O10.213, O10.219, O10.22, O10.23, O10.311, O10.312, O10.313, O10.319, O10.32, O10.33, O10.411, O10.412, O10.413, O10.419, O10.42, O10.43, O10.911, O10.912, O10.913, O10.919, O10.92, O10.93, O11.1, O11.2, O11.3, O11.4, O11.5, O11.9, O12.00, O12.01, O12.02, O12.03, O12.04, O12.05, O12.10, O12.11, O12.12, O12.13, O12.14, O12.15, O12.20, O12.21, O12.22, O12.23, O12.24, O12.25, O13.1, O13.2, O13.3, O13.4, O13.5, O13.9, O14.00, O14.02, O14.03, O14.04, O14.05, O14.10, O14.12, O14.13, O14.14, O14.15, O14.20, O14.22, O14.23, O14.24, O14.25, O14.90, O14.92, O14.93, O14.94, O14.95, O15.00, O15.02, O15.03, O15.1, O15.2, O15.9, O16.1, O16.2, O16.3, O16.4, O16.5, O16.9, O20.8, O20.9, O21.0, O21.1, O21.2, O21.8, O21.9, O22.00, O22.01, O22.02, O22.03, O22.10, O22.11, O22.12, O22.13, O22.20, O22.21, O22.22, O22.23, O22.30, O22.31, O22.32, O22.33, O22.40, O22.41, O22.42, O22.43, O22.50, O22.51, O22.52, O22.53, O22.8X1, O22.8X2, O22.8X3, O22.8X9, O22.90, O22.91, O22.92, O22.93, O23.00, O23.01, O23.02, O23.03, O23.10, O23.11, O23.12, O23.13, O23.20, O23.21, O23.22, O23.23, O23.30, O23.31, O23.32, O23.33, O23.40, O23.41, O23.42, O23.43, O23.511, O23.512, O23.513, O23.519, O23.521, O23.522, O23.523, O23.529, O23.591, O23.592, O23.593, O23.599, O23.90, O23.91, O23.92, O23.93, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03, O24.111, O24.112, O24.113, O24.119, O24.12, O24.13, O24.311, O24.312, O24.313, O24.319, O24.32, O24.33, O24.410, O24.414, O24.415, O24.419, O24.420, O24.424, O24.425, O24.429, O24.430, O24.434, O24.435, O24.439, O24.811, O24.812, O24.813, O24.819, O24.82, O24.83, O24.911, O24.912, O24.913, O24.919, O24.92, O24.93, O25.10, O25.11, O25.12, O25.13, O25.2, O25.3, O26.00, O26.01, O26.02, O26.03, O26.10, O26.11, O26.12, O26.13, O26.20, O26.21, O26.22, O26.23, O26.30, O26.31, O26.32, O26.33, O26.40, O26.41, O26.42, O26.43, O26.50, O26.51, O26.52, O26.53, O26.611, O26.612, O26.613, O26.619, O26.62, O26.63, O26.711, O26.712, O26.713, O26.719, O26.72, O26.73, O26.811, O26.812, O26.813, O26.819, O26.821, O26.822, O26.823, O26.829, O26.831, O26.832, O26.833, O26.839, O26.841, O26.842, O26.843, O26.849, O26.851, O26.852, O26.853, O26.859, O26.86, O26.872, O26.873, O26.879, O26.891, O26.892, O26.893, O26.899, O26.90, O26.91, O26.92, O26.93, O28.0, O28.1, O28.2, O28.3, O28.4, O28.5, O28.8, O28.9, O29.011, O29.012, O29.013, O29.019, O29.021, O29.022, O29.023, O29.029, O29.091, O29.092, O29.093, O29.099, O29.191,

Page 54 of 58

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Page 55 of 58

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O35.3XX5, O35.3XX9, O35.4XX0, O35.4XX1, O35.4XX2, O35.4XX3, O35.4XX4, O35.4XX5,
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Page 56 of 58

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Page 57 of 58

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#### Definitions

**Asymptomatic**: Having no symptoms.

**Medically Necessary**: A treatment, procedure or drug is medically necessary only when it has been established as safe and effective for the particular symptoms or diagnosis, is not investigational or experimental, is not being provided primarily for the convenience of the patient or the provider, and is provided at the most appropriate level to treat the condition.

## **Appendix – Immunization Codes**

#### • Vaccination Codes:

90476	90477	90671*		90759
90619	90658	90677*		
90620	90660		90739	

Page 58 of 58

90621	90661	90694	90740	
90630	90662	90696	90743	
90632	90664	90697	90744	
90633	90666*	90698	90746	
90634	90667	90700	90747	
90636	90668*	90702	90748	
90644	90670	90707	90750	
90647	90672	90710	90756	
90648	90673	90713	Q2034	
90649	90674	90714	Q2035	
90650	90680	90715	Q2036	
90651	90681	90716	Q2037	
90653	90682	90723	Q2038	
90654	90685	90732	Q2039	
90655	90686	90733		
90656	90687	90734		
90657	90688	90736		
	90689			

<sup>\*</sup>Pending FDA Approval 91300, 91301, 91302, 91303, 91304-COVID

#### • Administration Codes:

90460	90471	90473	G0008	G0010
90461	90472	90474	G0009	

0001A, 0002A, 0003A, 0011A, 0012A, 0021A, 0022A, 0031A, 0041A, 0042A, D1701, D1702, D1703, D1704, D1705, D1706, D1707—COVID