EMPLOYER NEWS | PREVENTIVE SERVICES

What's covered for your employees

For over 65 years, keeping members healthy has been the foundation of our integrated care model. And when your employees get the right care at the right time, they stay healthier and more productive – saving you money. That's why preventive care is essential to the health of your workforce and your business.

Under the Affordable Care Act, most of our plans cover certain preventive services **with no cost sharing.** This guide lists the services covered by our Health Care Reform Preventive Services Package for the following commercial (non-Medicare) medical plans with contract effective dates beginning on or after January 1, 2015:

- all individual and family plans except grandfathered plans
- all small group plans
- all nongrandfathered large group coverage
- all grandfathered and retiree-only large group coverage, where groups choose to cover these services with no cost sharing

This guide also includes information about additional services covered in certain states and Washington, D.C.

What's new

Most of our plans will now cover the following services with no cost sharing:

- low-dose aspirin for women after 12 weeks of gestation who are at high risk for preeclampsia (effective October 1, 2015)
- fluoride varnish for the primary teeth of all infants and children starting at the age of primary tooth eruption (effective June 1, 2015)



Our Health Care Reform Preventive Services Package

The following preventive services are covered without a copayment, coinsurance, or deductible when delivered by a network provider.

Preventive services for adults

- age-appropriate preventive medical > immunizations for adults (doses, examination
- discussion with primary care physician regarding alcohol misuse
- discussion with primary care physician regarding **obesity and** weight management
- one-time screening for abdominal **aortic aneurysm** by ultrasonography in men age 65 to 75 who have ever smoked
- annual screening for lung cancer with low-dose computed tomography in adults age 55 to 80 who are at high risk based on their current or past smoking history
- blood pressure screening for all adults
- cholesterol screening for adults at higher risk of cardiovascular disease
- colon cancer screening for adults age 50 to 75
- depression screening for adults
- **type 2 diabetes screening** for adults with high blood pressure
- hepatitis C virus screening for adults at high risk of infection and one-time screening for adults born between 1945 and 1965
- **hepatitis B virus screening** for adults at high risk of infection
- discussion with primary care physician regarding aspirin for adults at higher risk of cardiovascular disease
- discussion with primary care physician regarding **diet counseling** for adults at higher risk of chronic disease

- recommended ages, and recommended populations vary):
 - hepatitis A
 - hepatitis B
 - herpes zoster
 - human papillomavirus
 - influenza
 - measles, mumps, rubella
 - meningococcal
 - pneumococcal
 - tetanus, diphtheria, pertussis
 - varicella
- screening for all adults at higher risk of sexually transmitted infections and counseling for prevention of sexually transmitted infections, including:
 - chlamydia
 - gonorrhea
 - HIV
 - syphilis
- discussion with primary care physician regarding tobacco cessation
- physical therapy to prevent falls in community-dwelling adults age 65 and older who are at increased risk of falling
- over-the-counter drugs when prescribed by a physician for preventive purposes:
 - aspirin to reduce the risk of heart attack
 - vitamin D supplements for adults to prevent falls

The required preventive services are based on recommendations by the United States Preventive Services Task Force, the Health **Resources and Services** Administration, and the Centers for Disease Control and Prevention. The services listed in this document may be subject to certain guidelines, such as age and frequency. They may be subject to cost sharing if they aren't provided in accord with these guidelines.

KAISER PERMANENTE



Preventive services for women, including pregnant women

- age-appropriate preventive medical
 discussion with primary care physician about intervention
- discussion with primary care physician regarding
 chemoprevention in women at higher risk of breast cancer
- prescribed, FDA-approved medications for breast cancer
 prevention in high-risk women age 35 and older who have no prior history of breast cancer
- discussion with primary care physician regarding inherited susceptibility to breast and/or ovarian cancer
- mammography screening for breast cancer for women age 40 or older
- cervical cancer screening in women age 21 to 65
- osteoporosis screening for women 65 or older and women at higher risk
- discussion with primary care physician regarding tobacco cessation
 prescribed, FDA-approved contraceptive devices and
- chlamydia infection screening for sexually active women (and men) at higher risk
- gonorrhea screening for all women at higher risk
- HIV screening for all pregnant women and other women at higher risk (was effective in April 2013)
- syphilis screening for all pregnant women and other women at higher risk
- anemia screening for pregnant women
- urinary tract or other infection screening for pregnant women
- hepatitis B screening for pregnant women at their first prenatal visit
- discussion with primary care physician about folic acid supplements for women who may become pregnant
- Rh incompatibility screening for pregnant women and follow-up testing for women at higher risk
- routine prenatal care*
- discussion with primary care physician regarding preconception care

- discussion with primary care physician about interventions to promote and support breastfeeding and comprehensive lactation support and counseling
- provision of breastfeeding equipment
- gestational diabetes screening for pregnant women between 24 and 28 weeks of gestation and for pregnant women identified to be at high risk of diabetes
- discussion with primary care physician about interpersonal and domestic violence
- female sterilizations (some group plans are not required to cover these services – for more information on whether your plan covers these services, see your Evidence of Coverage or contact your Kaiser Permanente representative)
- prescribed, FDA-approved contraceptive devices and contraceptive drugs; discussion with primary care physician about contraceptive methods (some group plans are not required to cover these services – for more information on whether your plan covers these services, see your Evidence of Coverage or contact your Kaiser Permanente representative)
- over-the-counter folic acid for women to reduce the risk of birth defects when prescribed by a physician for preventive purposes
- low-dose aspirin for women after 12 weeks of gestation who are at high risk for preeclampsia (effective October 1, 2015)
- for women who have family members with breast, ovarian, tubal, or peritoneal cancer, screening for family history that may be associated with an increased risk of potentially harmful mutations in breast cancer susceptibility genes (BRCA1 or BRCA2)
 - genetic counseling for women with positive screening results
 - BRCA genetic testing when clinically indicated after genetic counseling

* Prenatal visits in Colorado are covered as routine base medical services and are subject to their applicable cost share.



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Preventive services for children

- ▶ age-appropriate **preventive medical** ▶ discussion with primary care examination
- medical history for all children throughout development
- height, weight, and body mass index measurements for children
- **behavioral assessments** for children of all ages by primary care physician
- developmental screening for children under 3 years and surveillance throughout childhood by primary care physician
- discussion with primary care physician regarding **alcohol** and drug use assessments for adolescents
- discussion with primary care physician regarding tobacco cessation
- autism screening for children at age 18 months and 24 months by primary care physician
- depression screening for adolescents
- blood pressure screening for adolescents
- cervical dysplasia screening for sexually active females
- congenital hypothyroidism screening for newborns
- phenylketonuria (PKU) screening in newborns
- **b** dyslipidemia screening for children at higher risk of lipid disorders
- oral health risk assessment for young children by primary care physician
- discussion with primary care physician regarding fluoride supplementation for children 6 months of age or older who have no fluoride in their water source
- **fluoride varnish** for the primary teeth of all infants and children starting at the age of primary tooth eruption (effective June 1, 2015)
- ▶ lead screening for children at risk of exposure

- physician regarding **obesity** screening and counseling
- gonorrhea prevention medication for the eyes of all newborns
- hearing screening for all newborns
- vision screening for all children hematocrit or hemoglobin
- screening for children
- hemoglobinopathies or sickle cell screening for newborns
- tuberculin testing for children at higher risk of tuberculosis
- hepatitis B virus screening for adolescents at high risk of infections
- ▶ HIV screening for adolescents at higher risk
- sexually transmitted infection (STI) prevention counseling for adolescents at higher risk
- discussion with primary care physician regarding iron supplements for children age 6 months to 12 months who are at risk of anemia
- over-the-counter drugs when prescribed by a physician for preventive purposes:
 - iron supplements for children to reduce the risk of anemia
 - oral fluoride for children to reduce the risk of tooth decay
- immunizations for children from birth to 18 years (doses, recommended ages, and recommended populations vary):
 - diphtheria, tetanus, pertussis
 - Haemophilus influenzae type B
 - hepatitis A
 - hepatitis B
 - human papillomavirus
 - inactivated poliovirus
 - influenza
 - measles, mumps, rubella
 - meningococcal
 - pneumococcal
 - rotavirus
 - varicella



Additional state- or region-mandated services

Below are lists of additional state- or region-mandated preventive services. For contracts issued in one of these states or regions, our Health Care Reform Preventive Services Package also includes the services listed below for that state or region.

California

- first postpartum visit*
- travel immunizations
- prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)
- artificial insemination and sperm collection, processing, and testing for HIV-negative women who wish to conceive using sperm from HIV-positive donors
- retinal photography screenings for adults and children
- FDA-approved medications for tobacco cessation, including overthe counter medications, when prescribed by a physician.

Colorado

- breast cancer screenings for all at-risk individuals regardless of age
- colon cancer screenings for all at-risk > prostate cancer screenings (e.g., individuals regardless of age

Georgia

- ovarian cancer surveillance test for women over 35 or at risk
- prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)

Maryland

- prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)
- labs and X-rays associated with well-child visit

Oregon

- > prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)
- first postpartum visit

Virginia

- prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)
- labs and X-rays associated with well-child visit

Washington state

- prostate-specific antigen testing and digital rectal examination)
- first postpartum visit

Washington, D.C.

- prostate cancer screenings (e.g., prostate-specific antigen testing and digital rectal examination)
- ▶ labs and X-rays associated with well-child visit



^{*} Postpartum visits aren't part of the Health Care Reform Preventive Services Package for health savings account-compliant plans in California, and a deductible, copayment, or coinsurance may apply.

Additional information about preventive services

Preventive and other services provided during the same visit

There are some additional things to keep in mind about coverage for mandated preventive services provided along with other services during the same visit. The following cost-sharing rules apply when a mandated preventive service is provided during an office visit:

If the preventive service is billed separately (or is tracked as individual encounter data separately) from the office visit, then cost sharing may apply to the office visit.

If the preventive service is not billed separately from the office visit, or is not tracked separately as an individual encounter, then:

- No cost sharing may apply to the office visit if the delivery of preventive service is the primary purpose of that office visit.
- Cost sharing may apply to the office visit if the primary purpose of that office visit is something other than the delivery of the preventive service."



For more information

Please see the *Evidence* of *Coverage, Certificate of Insurance,* membership agreement, or *Member Handbook* for plan information about preventive services. Or contact your Kaiser Permanente representative for more information.

Information may have changed since publication.



