

Policy number: CP-IFP21-013B

Effective Date: April 1, 2024

Preventive Services Adults/Female/Children

The purpose of this policy is to provide clarity and specificity for coverage of Preventive Services Adults/Female/Children. UCare covers preventive services that meet the coverage requirements under federal and state laws and regulations. Preventive health services include screening tests to detect conditions that have not been diagnosed and have not produced symptoms, immunizations, preventive check-ups, and preventive counseling. Preventive benefits undergo regular review that may result in change. Coverage may also change for specific member ages or gender.

DISCLAIMER

Coverage Policies are developed to assist in identifying coverage for UCare benefits under UCare's health plans. They are intended to serve only as a general reference regarding UCare's administration of health benefits and are not intended to address all issues related to coverage for health services provided to UCare members.

These services may or may not be covered by all UCare products (refer to product section of individual coverage policy for product-specific detail). Providers are encouraged to have their UCare patient refer to their UCare plan documents (Evidence of Coverage/Member Handbook/Member Contract) for specific coverage information. If there is a conflict between a coverage policy and the UCare plan documents, the UCare plan documents prevail.

Coverage Policies do not constitute medical advice. Providers are responsible for submission of accurate and compliant claims.

Product Summary

This coverage policy applies to the following UCare products:

UCare product	Applies to
UCare Individual & Family Plans (IFP), UCare IFP with M Health Fairview	✓
UCare Medicare Plans, UCare Medicare with M Health Fairview & North Memorial Health, UCare Advocate Plus (HMO I-SNP), EssentiaCare	
UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP)	
UCare Connect + Medicare (HMO D-SNP)	
UCare Connect (SNBC)	
Prepaid Medical Assistance Program (PMAP), MinnesotaCare	
Minnesota Senior Care Plus (MSC+)	

Benefit category:

Preventive Care, Screenings, and Immunizations

Definitions or summary

UCare covers preventive care services from health care professionals, based on age, sex and certain risk factors that are included in:

- Affordable Care Act (ACA),
- MN State statutes,
- A and B recommendations of the United States Preventive Services Task Force (USPSTF),
- Advisory Committee on Immunizations Practices (ACIP) of the Centers for Disease Control (CDC),
- Health Resources and Services Administration (HRSA), and
- Bright Futures.

Coverage policy

Routine health exams and health assessments

The health care provider will advise members on how often assessments are needed based on their age, gender, and health status. For additional information, including recommended immunization schedule, please see the Preventive Health Care Guidelines: ucare.org/preventivecare

For all Adults

- Abdominal aortic aneurysm one-time screening ultrasound for men of specified ages (65-75) who have ever smoked
- Alcohol misuse screening and counseling for people 18 and older
- Anxiety screening for people 18 years and older
- Blood pressure screening for people 18 and older without known hypertension
- Cholesterol screening for people ages 40-75 who have 1 or more cardiovascular risk factors and estimated 10-year CVD risk of 10% or greater
- Colorectal cancer screening for people ages 45 to 75
- Depression and suicide risk screening for people ages 18 years and older
- Diabetes (Type 2) screening for people ages 35 to 70 who are overweight or obese
- Diet counseling for adults with cardiovascular disease risk factors
- Falls prevention (with exercise or physical therapy) for people 65 years and over, living in a community setting
- Hepatitis B screening for asymptomatic, nonpregnant people at risk of infection
 - People with history of/or current injected drug use
 - Men who have sex with men
 - People with HIV
 - Sexual partners: needle sharing contact or household contacts of people who are Hepatitis B positive
 - People from countries with 2% or more Hepatitis B prevalence
 - U.S.-born people not vaccinated as infants
- Hepatitis C screening for people ages 18 to 79 years
- HIV screening for everyone ages 15 to 65, and other ages at increased risk
- Annual lung cancer screening with low-dose computed tomography (LDCT) for people ages 50 to 80 who are at high risk for lung cancer due to a 20 pack per year smoking history and currently smoke, or who have quit within the last 15 years
- Obesity screening and counseling

- Pre-exposure prophylaxis (PrEP) HIV prevention medication for HIV-negative adults at high risk for getting HIV through sex or injection drug use
- Prostate cancer screening (Prostate Specific Antigen or PSA) including digital rectal exam and PSA blood test for men 40 years of age or older who are symptomatic or in a high-risk category and for all men 50 years of age or older
- Sexually transmitted infection (STI) prevention counseling for people who have ever been sexually active and are at increased risk
- Statin preventive medication for the primary prevention of cardiovascular disease for adults ages 40 to 75 at high risk
- Syphilis screening for asymptomatic, nonpregnant people who are at increased risk of infection.
- Tobacco use screening for all people 18 years and older
 - Tobacco cessation interventions for tobacco users
- Tuberculosis (TB) screening for asymptomatic people in populations at increased risk defined as:
 - People born, or former residents of countries with increased tuberculosis (TB) presence
 - People living in, or have lived in high-risk congregate settings (e.g., homeless shelters, correctional facilities)

Immunizations for people ages 19 and older as recommended by Center for Disease Control (CDC) and Advisory Committee on immunization Practices (ACIP)

— doses, recommended ages, and recommended populations vary:

- Chickenpox (Varicella)
- COVID-19
- Diphtheria
- Flu (influenza) (*covered without member cost share in or out of network.*)
- Hepatitis A
- Hepatitis B
- Human Papillomavirus (HPV)
- Measles, Mumps, Rubella (MMR)
- Meningococcal
- Pneumococcal
- RSV
- Shingles
- Tetanus (Tetanus, diphtheria, pertussis (TDAP) or Tetanus, diphtheria (TD)
- Whooping Cough (Pertussis)

Covered preventive medications require a prescription (see plan formulary for limitations)

- Antiretroviral to prevent HIV infection pre-exposure, antiretroviral therapy for HIV negative people at high risk of infection
- Statins for the primary prevention of cardiovascular disease
- Tobacco cessation products

Female Health *All preventive services and screenings listed above and the following screenings:*

- Birth control: Food and Drug Administration (FDA)-approved contraceptive methods, sterilization procedures, and patient education and counseling, as prescribed by a

- health care provider for females with reproductive capacity
- Bone density screening for all females over age 65, or females ages 64 and younger who have gone through menopause. Breast cancer genetic test counseling (BRCA) for females with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or an ancestry associated with BRCA 1/2 gene mutation
- Breast cancer mammography screenings, which includes 2D and 3D mammography or digital tomosynthesis, and some additional diagnostic services or testing when necessary
 - Every 1-2 years for females 40 and over
- Breast cancer chemoprevention counseling for females 35 and older at increased risk of breast cancer
- Cervical cancer screening and human papillomavirus testing
 - For females ages 21 to 29 years: cervical cytology screening alone every three years
 - For females ages 30 to 65 years: cervical cytology alone every three years, every 5 years with high risk human papillomavirus (hrHPV) testing alone, OR every 5 years with hrHPV testing in combination with cytology (cotesting)
- Chlamydia infection screening in all sexually active females 24 years or younger and in females 25 years or older who are at increased risk for infection
- Diabetes screening for females with a history of gestational diabetes who aren't currently pregnant and who haven't been diagnosed with type 2 diabetes before
- Domestic and inter-personal violence screening and counseling for all females
- Gonorrhea screening in all sexually active females 24 years or younger and in females 25 years or older who are at increased risk for infection
- HIV screening and counseling for sexually active people
- Sexually transmitted infection counseling for sexually active females
- Urinary incontinence screening for females yearly
- Well-woman visits, to get recommended services for all females

Covered preventive medications require a prescription (see plan formulary for limitations)

- Drugs to lower risk of breast cancer
- Folic acid for people of childbearing age

FDA-approved contraceptives from a pharmacy or contraception services given in a provider's office. Includes member education and counseling. *Covered contraception methods require a prescription.*

Coverage is for at least one form of contraception on the plan's formulary in each of these methods:

- Cervical caps
- Diaphragms
- Emergency contraception
- Female condoms
- Implantable rods
- IUD with copper
- IUD with progestin
- Oral contraceptives (combined pill)
- Oral contraceptives (extended/continuous use)
- Oral contraceptives (progestin only)

- Patch
- Shot/injection
- Spermicides
- Sponges
- Vaginal contraceptive rings

Services for pregnant people or people who may become pregnant *All preventive services and screenings listed above and the following:*

- Breastfeeding support and counseling from trained providers, and access to breastfeeding supplies, for pregnant and nursing people
- Expanded tobacco intervention and counseling for pregnant tobacco users
- Folic acid supplements for people who may become pregnant
- Gestational diabetes screening for people 24 weeks pregnant (or later) and those at high risk of developing gestational diabetes
- Hepatitis B screening for pregnant people at the first prenatal visit
- Maternal depression screening performed at well-baby visits (1, 2, 4 and 6 months)
- Preeclampsia prevention and screening for pregnant people with high blood pressure
- Rh incompatibility screening for all pregnant people and follow-up testing for people at high risk
- Syphilis screening: 3 times during pregnancy
 - During first trimester
 - Pregnant people who are not accessing prenatal care and have not been screened for syphilis should be tested in any health care setting
 - Early in third trimester (28-32 weeks' gestation)
 - Screening early enough in pregnancy prior to delivery to allow treatment to occur
 - At delivery
 - Including pregnant people who experience a stillbirth (fetal death after 20 weeks' gestation, or fetus weighs greater than 500 g)
- Screening for asymptomatic bacteriuria using urine culture in pregnant people

Covered preventive medications require a prescription (see plan formulary for limitations)

- Low-dose aspirin for pregnant people at risk for preeclampsia
- Daily supplement containing 0.4 to 0.8 mg (400 to 800 µg) of folic acid for people who are planning or capable of pregnancy

Children's Health

Child health supervision services including pediatric preventive services, routine immunizations, developmental assessments, and laboratory services for children from birth to the end of month they turn age 21.

- Anxiety screening at ages 8 to 18
- Alcohol, tobacco, and drug use assessments for school-aged children and adolescents
- Autism screening for children at 18 and 24 months
- Behavioral assessments
- Bilirubin concentration screening for newborns
- Blood pressure screening
- Blood screening for newborns
- Depression screening beginning routinely at age 12
- Development observation
- Developmental screening at 9, 18 and 30 months
- Developmental/behavioral health screenings

- Dyslipidemia screening for all children once between 9 and 11 years and once between 17 and 21 years, and for children at high risk of lipid disorders
- Fluoride supplements for children without fluoride in their water source
- Fluoride varnish for all infants and children as soon as teeth are present
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening for all newborns; and regular screenings for children and adolescents as recommended by their provider
- Hematocrit or hemoglobin screening for all children
- Hemoglobinopathies or sickle cell screening for newborns
- Hepatitis B screening for adolescents at higher risk
- HIV screening for adolescents at higher risk
- Hypothyroidism screening for newborns
- Lead screening for children at risk of exposure
- Measurements (blood pressure, length, height, weight, BMI, head circumference) Obesity screening and counseling
- Oral health risk assessment for young children beginning at age 6 months
- Phenylketonuria (PKU) screening and all newborn screenings
- PrEP (pre-exposure prophylaxis) HIV prevention medication for HIV-negative adolescents at high risk for getting HIV through sex or injection drug use
- Psychosocial/behavioral assessment
- Sexually transmitted infection (STI) prevention counseling and screening for adolescents who are sexually active
- Tuberculin testing for children at higher risk of tuberculosis
- Vision screening (Snellen eye chart). One screening every calendar year
- Well-baby and well-child visits

Immunizations for children from birth to age 18 as recommended by Center for Disease Control (CDC) and Advisory Committee on immunization Practices (ACIP) Bright Futures

— *doses, recommended ages, and recommended populations may vary.*

For additional information, including recommended immunization schedule, please see the Preventive Health Care Guidelines: ucare.org/preventivecare

- Chickenpox (Varicella)
- COVID-19
- Diphtheria, tetanus, and pertussis (DTaP)
- Haemophilus influenza type b
- Hepatitis A
- Hepatitis B
- Human Papillomavirus (HPV)
- Inactivated Poliovirus
- Influenza (flu shot) (*covered without member cost share in or out of network.*)
- Measles, Mumps, Rubella (MMR)
- Meningococcal
- Pneumococcal
- Rotavirus
- RSV

Oral Health

- Fluoride supplements
- Fluoride varnish

Covered preventive medications require a prescription (see plan formulary for limitations)

- Anti-retroviral medications to prevent HIV infection for those at-risk of HIV infection
- Gonorrhea preventive medication (administered immediately following birth to prevent eye infection in newborns)
- Iron supplements
- Oral Fluoride supplements

FOR ALL PEOPLE REGARDLESS OF AGE

- **Coverage for services that are not preventive**
Benefits for diagnostic and treatment-related services would follow the applicable benefit category and be subject to member cost share

Examples of services subject to member cost share include, but are not limited to:

- *Tests or services done as a follow-up to findings during a preventive screening.*
- *A service or test when it monitors, diagnoses, or treats a new or existing health problem or monitors a chronic disease.*
- *Skin exams to check for moles, birthmarks, or other pigmented areas that look abnormal in color, size, shape, or texture are not considered preventive screenings.*
- *Lab tests such as Basic/Comprehensive Metabolic Blood Panels (BMP, CMP), Basic Metabolic Panel (BMP), Complete Blood Count (CBC) , General health panel, Thyroid Stimulating Hormone (TSH) even if these tests are done during a wellness visit in the absence of symptoms.*

Prior authorization
Not required

Related policies and documentation	
<i>References to other policies or documentation that may be relevant to this policy</i>	
Policy Number	Policy Description
CP-IFP21-012A	Colon Cancer Tests
CP-IFP23-034A	Maternity Services

References and source documents
<i>Links to the UCare contracts, Center for Medicare, and Medicaid Services (CMS), MHCP, Minnesota statute and other relevant documents used to create this policy</i>
Individual and Family Plan (IFP) member benefits
Individual and Family Plan (IFP) Formulary
Individual and Family Plan (IFP) Preventive Health Care Guidelines
Preventive health services under the Affordable Care Act (ACA)
United States Preventive Services Task Force (USPSTF) A & B recommendations
Bright Futures
Advisory Committee on Immunization Practice (ACIP)
Affordable Care Act (ACA) Essential Health Benefits
Minnesota Statute COVERAGE FOR DIAGNOSTIC PROCEDURES FOR CANCER
Syphilis Information for Health Professionals - MN Dept. of Health (state.mn.us)
Newborn Screening Information for Providers - MN Dept. of Health (state.mn.us)

Coverage policy development and revision history		
Version	Date	Note(s)
V1		New policy
V2	Nov.30, 2022	Annual review; updated version of coverage policy to Policy number: CP- IFP21-013B ; Updated USPSTF preventive guidelines regarding aspirin use for cardiovascular risk. USPSTF downgraded recommendation to "C"; gender neutral language change; change in recommendation to add MMR post - delivery; removal of Covid-19 paragraph
V3	Oct. 29, 2023	Annual review; Added USPSTF preventive guideline for Anxiety Screening; Updated minimum age USPSTF preventive guideline for Depression Screening; Removed Vitamin D use from Falls Prevention guidance; Added "some additional diagnostic services or testing when necessary" per state statute to screening mammography guideline. Added COVID-19 and RSV vaccination information per

		updated ACIP recommendations; Updated statin preventive medication to indicate this is for the primary prevention of cardiovascular disease.
V4	April 1, 2024	Added suicide risk screening to depression screening guideline for people ages 18 and older; Cervical cancer screening section-added HPV screening to section heading; Pregnant people-increased frequency of syphilis screening to 3 times based on MDH guidance; Children’s Health-added age of 8 to 18 to anxiety screening, depression screening at age 12; Added all newborn screenings to PKU screening; In examples of services subject to cost share-added “even if these tests are done during a wellness visit in the absence of symptoms” to sentence regarding routine lab panels.