

HRS Insight

Human Resource Services

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Guidelines for Women's Preventive Care Issued

Guidance has been issued on the PPACA requirement for first-dollar coverage of preventive health services. The newly published guidelines set forth specific health services for women that are subject to these requirements.

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The Patient Protection and Affordable Care Act (PPACA) requires new plans to cover certain preventive services and eliminates in-network cost-sharing for these services. HHS has published guidelines for group health plans and health insurance issuers relating to women's preventive health care services subject to these requirements.

Background

PPACA requires coverage of certain preventive health care services. Last year the agencies issued interim final regulations providing guidance on the services subject to this requirement. Under these regulations, plans may not charge copayments, coinsurance or deductibles when such services are provided by a network provider (for plans that have networks of providers.)

The regulations provide four categories of preventive health services that are subject to these requirements, referring

to lists of individual services developed by the United States Preventive Services Task Force, immunizations listed by the Centers for Disease Control and Prevention, and guidelines for children and adolescents supported by the Health Resources and Services Administration (HRSA). The fourth category is care and screenings for women that are included in HRSA guidelines, which had not been issued when the regulations were published, but were to be issued by August 2011.

Required Health Plan Coverage Guidelines

The HRSA-Supported Women's Preventive Services guidelines were issued on August 1, 2011. They add to the list of preventive care services, such as mammograms and screening for cervical cancer, that are already required to be covered by new health



plans under PPACA and the temporary regulations.

Newly Listed Preventive Care Services

The new guidelines, which were developed by the Institute of Medicine (IOM), are intended to address health needs specific to women and to fill gaps in existing guidelines. The following services and screenings are included in these guidelines:

- Annual well-women visits to obtain age and developmentally appropriate preventive services, including preconception and prenatal care and other preventive services;
- All FDA-approved contraceptive methods, sterilization procedures and patient education and counseling, although group health plans sponsored by certain religious employers are exempt from this requirement (see below);
- Screening for gestational diabetes in pregnant women;
- Human papillomavirus testing, beginning at age 30 and no more frequently than every 3 years thereafter;
- Annual counseling for sexually transmitted infections;
- Annual counseling and screening for human immunodeficiency virus (HIV);

- Breastfeeding support, supplies and counseling in connection with each birth; and
- Annual screening and counseling for interpersonal and domestic violence.

Amendment to the Temporary Regulations

The agencies also amended the temporary regulations, effective August 3. The amendment gives HRSA discretion to exempt certain religious employers from the guidelines for contraceptive services. A religious employer is defined as one that: (1) has the inculcation of religious values as its purpose; (2) primarily employs persons who share its religious tenets; (3) primarily serves persons who share its religious tenets; and (4) is a nonprofit organization under the Code. The agencies are seeking comments on this definition as well as alternative definitions.

Because HRSA's discretion to establish an exemption applies only to group health plans sponsored by certain religious employers and group health insurance offered in connection with such plans, health insurance issuers in the individual health insurance market would not be covered by the exemption.

Effective Date

Under the regulations, a recommendation becomes effective once it appears in the relevant recommendations or guidelines. Non-grandfathered plans must comply with such recommendations beginning with the first plan year commencing one year after the date the recommendation is issued.

The HRSA-supported health plan coverage guidelines for women's preventive care were published on August 1, 2011. Accordingly, non-grandfathered plans must comply with

these recommendations beginning with the first plan year that begins on or after August 1, 2012.

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