



## Oxbridge Health: Preventive Care Services

### Policy Background

The purpose of this policy is to define which services and immunizations are covered under the category of preventive care services as required by Section 2713 of the Patient Protection and Affordable Care Act (PPACA). Preventive care services are typically not subject to deductibles, co-payments or coinsurance as long as the services are being provided by an in-network provider, but the plan's benefit language should always be reviewed for any exceptions.

The following agencies, appointed by the Affordable Care Act (ACA), are responsible for issuing recommendations on preventive care services:

- Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC)
- United States Preventive Services Task Force (USPSTF)
- Health Resources and Services Administration (HRSA) in regards to preventive services for women's health and infant, children and adolescent well-being (referred to as "Bright Futures")

The USPSTF assigns a letter grade (A, B, C, D, or I) for the recommended services that are released. The grade definitions for USPSTF recommendations are as follows:

| Grade    | Definition   |
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| <b>A</b> | The USPSTF recommends the service. There is high certainty that the net benefit is substantial.  |
| <b>B</b> | The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.  |
| <b>C</b> | The USPSTF recommends selectively offering or providing this service to individual patients based on professional judgment and patient preferences. There is at least moderate certainty that the net benefit is small.                      |
| <b>D</b> | The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.  |
| <b>I</b> | The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined. |

It is important to understand the difference between preventive care and diagnostic care. Preventive services are conducted on individuals who have no symptoms with the goal of preventing illness or for early detection of illness. Many of these services are referred to as “screenings.” Diagnostic services are performed when individuals may have an existing health condition that needs further management.

Preventive services are covered on a first dollar coverage basis while diagnostic services are subject to a copay, deductible or co-insurance. For example, a screening colonoscopy should have no patient amount due and the deductible and co-insurance are both waived. However, if the physician performs a diagnostic procedure (biopsy) or therapeutic procedure (polyp removal), at the time of the screening colonoscopy, it may no longer be considered a screening. Use of correct modifiers and sequencing the diagnosis code correctly would increase the likelihood that the service may still be regarded as screening by the payer.

Screening colonoscopy:

Screening colonoscopies are performed on asymptomatic individuals based on age, gender, medical history, and family history, according to medical guidelines. The purpose is to look for evidence of colorectal cancer or polyps. Whether a polyp or cancer is ultimately found does not change the intent of the screening procedure.

Diagnostic colonoscopy:

Diagnostic colonoscopies are performed in response to signs or symptoms to investigate and diagnose a condition, such as for rectal bleeding and anemia.

**Policy Information:**

The following table provides a list of the recommendations released by the USPSTF, ACIP, HRSA, or Bright Futures.

The following criteria must be met in order for claims to qualify as a preventive care service:

- Service was provided by an in-network provider
- Service aligns with guidelines from the USPSTF, ACIP, HRSA or Bright Futures
- Claim includes appropriate preventive diagnosis and procedure codes
- Claim meets applicable medical policy review criteria in terms of benefit coverage, medical and coding policies

Services not reimbursable at the preventive level may be reimbursable under another portion of the medical plan. This policy is not intended to influence clinical decisions or interfere with the provider-patient relationship. Please refer to your Summary Plan Document (SPD) for a complete list of preventive services.

| USPSTF / HRSA / ACIP / Bright Futures Recommendations:  | Procedure Code(s):   |
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| <p><b>Abdominal Aortic Aneurysm Screening</b>      <b>Aortic USPSTF “B”</b></p> <p><u>Recommendation December 2019</u></p> <p>The USPSTF recommends 1-time screening for abdominal aortic aneurysm with ultrasonography in men aged 65 to 75 years who have ever smoked.</p>  | <p>76706</p> <p>Reimbursable at the preventive level when submitted with one of the following: Z13.6, Z87.891, Z72.0, Z00.00, Z00.01, F17.210, F17.200</p>         |
| <p><b>Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions</b></p> <p><u>USPSTF “B” Recommendation November 2018</u></p> <p>The USPSTF recommends screening for unhealthy alcohol use in primary care settings for adults 18 years or older, including pregnant women, and providing persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce unhealthy alcohol use.</p> <p>Bright Futures<br/>Recommends alcohol and drug use assessments for adolescents between the ages of 11 to 21 years.</p> | <p>99385, 99386, 99387, 99395, 99396, 99397, 99408, 99409, G0396, G0397, G0442, G0443</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> |
| <p><b>Anxiety Screening Disorders in Adults</b> <u>USPSTF Released FINAL “B” Recommendation for Screening for Anxiety Disorders in Adults 06/30/2023</u></p> <p>The USPSTF recommends screening for anxiety disorders in adults, including pregnant and postpartum persons.</p>   | <p>96127</p> <p>Reimbursable at the preventive level when billed with a diagnosis of Z00.129, Z13.31, Z13.32, Z13.39, Z13.41, or Z13.42</p>                        |

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| <p><u>HRSA Recommendation June 2025: The Women’s Preventive Services Initiative recommends screening for anxiety in adolescent and adult women, including those who are pregnant or postpartum.</u></p> | <p>99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, G0444</p> <p>Payable with any diagnosis</p> |
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| <p><b>Asymptomatic Bacteriuria in Adults Screening</b><br/> <u>USPSTF “B” Recommendation September 2019</u><br/> The USPSTF recommends screening for asymptomatic bacteriuria using urine culture in pregnant persons.</p>  | <p>81007, 87086, 87088</p> <p>Payable with a <a href="#">Pregnancy Diagnosis</a></p>   |
| <p><b>BRCA-Related Cancer Risk Assessment, Genetic Testing</b><br/> <u>USPSTF “B” Recommendation August 2019</u> USPSTF recommends that primary care clinicians assess 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 (BRCA1/2) gene mutations with an appropriate brief familial risk assessment tool. Women with a positive result on the risk assessment tool should receive genetic counseling and, if indicated after counseling, genetic testing.</p> | <p>These services are subject to Medical Policy and prior authorization may be required.</p>   |
|   | <p>81212, 81215, 81217, 81162-81167, 81307, 81308</p> <p>Reimbursable at the preventive level when submitted with one of the following primary diagnosis codes: Z80.3, Z80.41, Z85.3, Z85.43</p> |
|   | <p>96040, 96041</p> <p>Reimbursable at the preventive level when submitted with one of the following primary diagnosis codes: Z80.3 or Z80.41</p>  |
|   | <p>All other procedure codes for BRCA are payable with a diagnosis in <a href="#">Diagnosis List 1</a></p>   |

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| <p><b>Breast Cancer Screening</b><br/> <b>USPSTF “B” Recommendation April 2024</b><br/> The USPSTF recommends all women get screened for breast cancer every other year, starting at age 40 and continuing through age 74.</p> <p><b>HRSA Recommendation June 2025:</b> WPSI recommends that average-risk women initiate mammography screening no earlier than age 40 and no later than age 50. Screening mammography should occur at least biennially and as frequently as annually. Screening should continue through at least age 74 and age alone should not be the basis to discontinue screening. These screening recommendations are for women at average risk of breast cancer. Women at increased risk should also undergo periodic mammography screening, however, recommendations for additional services are beyond the scope of this recommendation.</p> | <p>77061, 77062, 77063, 77065, 77066, 77067,<br/> G0279 Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>  |
| <p><b>Breastfeeding Primary Care Interventions USPSTF “B” Recommendation April 2025</b> The USPSTF recommends providing interventions during pregnancy and after birth to support breastfeeding.</p> <p><b>HRSA Recommendation June 2025:</b> WPSI recommends comprehensive lactation support services (including consultation; counseling; education by clinicians and peer support services; and breastfeeding equipment and supplies) during the antenatal, perinatal, and postpartum periods to optimize the successful initiation and maintenance of breastfeeding. Breastfeeding equipment and supplies include, but are not limited to, double electric breast pumps (including pump parts and maintenance) and breast milk storage supplies. Access to double electric</p>  | <p>G0513, G0514</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> <hr/> <p>99401, 99402, 99403, 99404, 99411, 99412, 99347, 99348, 99349, 99350, 98960, 99361, 98962, A4281, A4282, A4283, A4284, A4285, A4286, E0602, E0603, E0604, S9443, A4287</p> <p>Payable with any diagnosis</p> |

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| <p>pumps should be a priority to optimize breastfeeding and should not be predicated on prior failure of a manual pump. Breastfeeding equipment may also include equipment and supplies as clinically indicated to support dyads with breastfeeding difficulties and those who need additional services.</p>   |  |
| <p><b>Cervical Cancer Screening</b><br/> <u>USPSTF “A” Recommendation August 2018:</u> The USPSTF recommends screening for cervical cancer every 3 years with cervical cytology alone in women aged 21 to 29 years. For women aged 30 to 65 years, the USPSTF recommends screening every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone, or every 5 years with hrHPV testing in combination with cytology (co-testing).</p> <p><u>HRSA Recommendation June 2025:</u> The Women’s Preventive Services Initiative recommends cervical cancer screening for average-risk women aged 21 to 65 years. For women aged 21 to 29 years, the Women’s Preventive Services Initiative recommends cervical cancer screening using cervical cytology (Pap test) every 3 years. Co-testing with cytology and human papillomavirus testing is not recommended for women younger than 30 years. Women aged 30 to 65 years should be screened with cytology and human papillomavirus testing every 5 years or cytology alone every 3 years. Women who are at average risk should not be screened more than once every 3 years.</p> <p>Cervical Dysplasia Screening<br/> <u>Bright Futures</u><br/> Recommends cervical dysplasia screening for adolescents age 21 years of age</p> | <p>99385, 99386, 99387, 99395, 99396, 99397, 87623, 87624, 87625, 87626, 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88155, 88164, 88165, 88166, 88167, 88174, 88175, G0101, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, G0476, P3000, P3001, Q0091, S0610, S0612, 0500T, 0096U</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> |

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| <p><b>Chlamydia Screening</b><br/> <u>USPSTF “B” Recommendations</u><br/> <u>September 2021</u><br/> The USPSTF recommends screening for chlamydia in sexually active women age 24 years and younger and in women 25 years or older who are at increased risk for infection.</p>  | <p>86631, 86632, 87110, 87270, 87320, 87490, 87491, 87492, 87801, 87810</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>    |
| <p><b>Cholesterol Screening:</b><br/> <b>children/adolescents</b> &gt;ages 9-11 years and 17-21 years<br/> &gt;ages 2-8 years and 12-16 years with risk factors</p> <p><b>Dyslipidemia Screening</b><br/> <u>Bright Futures</u><br/> Recommends dyslipidemia screening for children and adolescents between the ages of 24 months and 21 years of age</p> | <p>80061, 82465, 83718, 83719, 83721, 84478</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a> for ages 24 months - 21yrs old</p> |
| <p><b>Cholesterol Screening: adults</b><br/> age 40-75</p>  | <p>80061, 82465, 83718, 83719, 83721, 84478</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>                                |

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| <p><b>Colorectal Cancer Screening</b></p> <p><u>USPSTF “A” Recommendation May 2021</u> The USPSTF recommends screening for colorectal cancer in all adults aged 50 to 75 years.</p> <p><u>USPSTF “B” Recommendation May 2021</u> The USPSTF recommends screening for colorectal cancer in adults aged 45 to 49 years.</p> <p>The risks and benefits of different screening methods vary.</p> | <p>82270, 82274, G0328, 44388, 44389, 44391, 44392, 44394, 44401, 44404, 45378, 45380, 45381, 45382, 45384, 45385, 45388, G0105, G0106, G0120, G0121, G0122, 45330, 45331, 45333, 45335, 45338, 45346, G0104, 74263, 88304, 88305, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99417, S0285, 00812, 00813, 81528</p> |
|  | <p>Payable with any diagnosis</p>   |
|  | <p>Certain colorectal cancer screening services may be subject to medical policy criteria and may require prior authorization</p>   |
|  | <p>In the instance that a polyp is removed during a preventive colonoscopy, the colonoscopy as well as the removal of the polyp and the labs and services related to the colonoscopy are reimbursable at the preventive level</p>   |
|  | <p>74263</p> <p>Reimbursable at the preventive level when billed with one of the following three diagnosis codes: Z00.00, Z12.11, Z12.12</p>  |
|  | <p>Sedation procedure codes 99152, 99153, 99156, 99157, G0500</p> <p>Reimbursable at the preventive level when billed with a diagnosis of Z12.11 or Z12.12</p>  |
|  | <p>81528</p> <p>Reimbursable at the preventive level when billed with Z12.11 or Z12.12 for out-of-network claims</p>  |
|  | <p>Diagnosis codes R19.5, K63.5, Z86.010x are reimbursable at the preventive level</p>  |
|  | <p>Modifier 33 or PT may be applied payable with a diagnosis in <a href="#">Diagnosis List 1</a></p>  |

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| <p><b>Congenital Hypothyroidism Screening</b><br/> <u>USPSTF “A” Recommendation March 2008</u> The USPSTF recommends screening for congenital hypothyroidism in newborns.</p>  | <p>84443, 99381, S3620</p> <p>Payable with any diagnosis</p>  |
| <p><b>Dental Caries in Children from Birth Through Age 5 Years Screening</b><br/> <u>USPSTF “B” Recommendation December 2021</u><br/> The USPSTF recommends that primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluoride.<br/> <u>USPSTF “B” Recommendation December 2021</u><br/> The USPSTF recommends that primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption.</p> | <p>99188</p> <p>Payable with any diagnosis</p>  |
| <p><b>Depression Screening Adults</b><br/> <u>USPSTF “B” Recommendation June 2023</u><br/> The USPSTF recommends screening for depression in the general adult population, including pregnant and postpartum women. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.<br/> <u>USPSTF Released FINAL “B” Recommendation for Screening for Depression and Suicide Risk in Adults</u> Suicide Risk is an “I” recommendation which does not apply to the CPCP.</p>  | <p>99385, 99386, 99387, 99395, 99396, 99397, 96160, 96161, G0444</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> <p>96127</p> <p>Reimbursable at the preventive level when billed with a diagnosis of Z00.129, Z13.31, Z13.32, Z13.39, Z13.41, or Z13.42</p> |

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| <p><b>Depression in Children and Adolescents Screening</b><br/> <u>USPSTF “B” Recommendation October 2022</u> The USPSTF recommends screening for major depressive disorder in adolescents aged 12 to 18 years. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.</p> <p><u>Bright Futures</u><br/> Recommends depression screening for adolescents between the ages of 11 to 21 years</p> | 99384, 99385, 99394, 99395, G0444<br><br>Payable with a diagnosis in <a href="#">Diagnosis List 1</a>  |
|   | 96127<br><br>Reimbursable at the preventive level when billed with a diagnosis of Z00.129, Z13.31, Z13.32, Z13.39, Z13.41, or Z13.42                             |
| <p><b>Falls Prevention in Community Dwelling Older Adults: Interventions</b><br/> <u>USPSTF “B” Recommendation June 2024</u> The USPSTF recommends exercise interventions to prevent falls in community-dwelling adults aged 65 years or older who are at increased risk for falls.</p>   | 97110, 97112, 97116, 97150, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 97530<br><br>Reimbursable with a diagnosis of Z91.81, M62.81, R26.81 and R54 |

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| <p><b>Gestational Diabetes: Screening</b><br/> <u>USPSTF “B” Recommendation August 2021</u><br/> The USPSTF recommends screening for gestational diabetes in asymptomatic pregnant persons at 24 weeks of gestation or after.</p> <p><u>HRSA Recommendation December 2019</u><br/> The Women’s Preventive Services Initiative recommends screening pregnant women for gestational diabetes mellitus after 24 weeks of gestation (preferably between 24 and 28 weeks of gestation) in order to prevent adverse birth outcomes. Screening with a 50 g oral glucose challenge test (followed by a 3hour 100 g oral glucose tolerance test if results on the initial oral glucose challenge test are abnormal) is preferred because of its high sensitivity and specificity. The Women’s Preventive Services Initiative suggests that women with risk factors for diabetes mellitus be screened for preexisting diabetes before 24 weeks of gestation— ideally at the first prenatal visit, based on current clinical best practices.</p> | <p>36415, 82947, 82948, 82950, 82951, 82952,</p> <p>83036 Payable with a <a href="#">Pregnancy Diagnosis</a></p>   |
| <p><b>High Body Mass Index in Children and Adolescents: Interventions</b></p> <p><u>USPSTF “B” Recommendation June 2024</u><br/> The USPSTF recommends that clinicians provide or refer children and adolescents 6 years or older with a high body mass index (BMI) (≥95th percentile for age and sex) to comprehensive, intensive behavioral interventions.</p>  | <p>96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171, 97802, 97803, 97804, 99401, 99402, 99403, 99404, 99411, 99412, 99078, G0447, G0473</p> <p>Payable with a diagnosis of Z68.54, Z68.55, Z68.56</p>   |
| <p><b>Hypertensive Disorders of Pregnancy: Screening</b></p> <p><u>USPSTF “B” Recommendation September 2023</u><br/> The USPSTF recommends screening for hypertensive disorders in pregnant persons with blood pressure measurements throughout pregnancy.</p>  | <p>99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 999215, 99473, 99474, 0500F, 0501F, 0502F, 3074F, 3075F, 3077F, 3078F, 3079F, 3080F</p> <p>Payable with a diagnosis of: O13.9, O13.1, O13.2, O13.3, O14.00, O14.02, O14.03, O14.04, O14.05, O14.90, O14.92, O14.93, O14.94, O14.95, O09.00, O09.01, O09.02, O09.03, O09.1, O09.11, O09.12, O09.13, O09.A, O09.A1, O09.A2,</p> |

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|  | O09.A3, O09.21, 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, O10.9, O10.911, O10.912, O10.913, O10.919, R03.0, Z01.30, Z01.31  |
| <b>Folic Acid Supplementation to Prevent Neural Tube Defects: Preventive Medication</b><br><u>USPSTF “A” Recommendation August 2023</u><br>The USPSTF recommends that all persons planning to or who could become pregnant take a daily supplement containing 0.4 to 0.8 mg (400 to 800 mcg) of folic acid                       | Reimbursable at the preventive level when submitted with one of the following primary diagnosis codes:<br>Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z36.89, Z13.21  |
| <b>Anxiety in Children and Adolescents: Screening</b><br><u>USPSTF “B” Recommendation October 2022</u><br>The USPSTF recommends screening for anxiety in children and adolescents aged 8 to 18 years.  | 96127, 99401, 99402, 99403, 99404, G2121, 99383, 99384, 99393, 99394, G0444<br><br>Payable with a diagnosis of: Z00.121, Z00.129, Z13.31, Z13.39, Z13.40, Z13.41, Z13.42, Z13.89, F41.1, F41.9, F93.0, F40.10, F40.11   |
| <b>Aspirin Use to Prevent Preeclampsia and Related Morbidity and Mortality: Preventive Medication</b><br><u>USPSTF “B” Recommendation September 2021</u><br>The USPSTF recommends the use of low-dose aspirin (81 mg/day) as preventive medication after 12 weeks of gestation in persons who are at high risk for preeclampsia. | 99401, 99402, 99403, 99404, M1055, G8598, G9277, G9793, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, H1000, H1001, H1002, H1003, H1004, H1005, 0500F, 4086F, 0501F, 0502F<br><br>Payable with a diagnosis of: O14.90, O14.92, O14.93, O14.94, O14.95, O14.00, O14.02, O14.03, O14.04, O14.05, Z78.82, Z3A.13-Z3A.19, Z3A.20-Z3A.29, Z3A.30-Z3A.39, Z3A.40-Z3A.49, Z34.00-Z34.93, Z36.89, O09.21, 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, |

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|  | 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  |
| <b>Breast Cancer: Medication Use to Reduce Risk</b><br><u>USPSTF “B” Recommendation September 2019</u><br>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.         | 4179F, S0187, S0156<br><br>Payable with a diagnosis of: Z15.01, Z80.3, Z79.810, Z79.811, Z79.818, Z29.8  |
| <b>Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum: Preventive Medication</b><br><u>USPSTF “A” Recommendation January 2019</u><br>The USPSTF recommends prophylactic ocular topical medication for all newborns to prevent gonococcal ophthalmia neonatorum.   | 99460, 99461, 99462, 99463, 99468, 99469, 99477, 99478, 99479, 99480<br><br>Reimbursable at the preventive level only when accompanied with modifier 33 or one of the following diagnosis codes: Z00.100, Z00.110, Z00.111, Z29.89, Z29.9<br><br>The following NDCs may also be used: 00574-4024-35, 00574-4024-50 |
| <b>Skin Cancer Prevention: Behavioral Counseling</b><br><u>USPSTF “B” Recommendation March 2018</u><br>The USPSTF recommends counseling young adults, adolescents, children, and parents of young children about minimizing exposure to ultraviolet (UV) radiation for persons aged 6 months to 24 years with fair skin types to reduce their risk of skin cancer. | 99401, 99402, 99403, 99404, 99411, 99412<br><br>Reimbursable at the preventive level only when accompanied with modifier 33 or one of the following diagnosis codes: Z71.89, Z00.00, Z00.01, Z00.8, Z01, Z29.89, Z29.9, Z00.129, Z00.121   |
| <b>Gonorrhea</b><br><u>USPSTF “B” Recommendation September 2021</u><br>The USPSTF recommends screening for gonorrhea in sexually active women age 24 years and younger and in women 25 years or older who are at increased risk for infection.   | 87801, 87590, 87591, 87592, 87850<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>   |

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| <p><b>Healthy Diet and Physical Activity for Cardiovascular Disease Prevention in Adults with Cardiovascular Risk Factors: Behavioral Counseling</b><br/> <b>USPSTF “B” Recommendation</b><br/> <u>November 2020</u><br/> The USPSTF recommends offering or referring adults with cardiovascular disease risk factors to behavioral counseling interventions to promote a healthy diet and physical activity.</p> | <p>99385, 99386, 99387, 99395, 99396, 99397, G0438, G0439, G0446, S9452, S9470, 97802, 97803, 97804, G0270, G0271, 99078, 99401, 99402, 99403, 99404, 99411, 99412, G0473</p> <p>Payable with any diagnosis</p> |
| <p><b>Healthy Weight and Weight Gain in Pregnancy: Behavioral Counseling Interventions</b><br/> <b>USPSTF “B” Recommendation May 2021</b><br/> 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.</p>  | <p>99384, 99385, 99386, 99394, 99395, 99396, 99401, 99402, 99403, 99404, 99411, 99412</p> <p>Payable with any diagnosis</p>   |
| <p><b>Hepatitis B in Pregnant Women Screening</b> <b>USPSTF “A” Recommendation</b><br/> <u>July 2019</u> The USPSTF recommends screening for hepatitis B virus infection in pregnant women at their first prenatal visit.</p>   | <p>80055, 86704, 86705, 86706, 86707, 87340, 87341, 80074, 80076, G0499, 36415</p> <p>Payable with a <a href="#">Pregnancy Diagnosis</a>, or a diagnosis code in <a href="#">Diagnosis List 1</a></p>           |
| <p><b>Hepatitis B Virus Infection Screening</b><br/> <b>USPSTF “B” Recommendation</b><br/> <u>December 2020</u><br/> The USPSTF recommends screening for hepatitis B virus infection in adolescents and adults at increased risk for infection.</p>   | <p>80055, 80074, 80076, 86704, 86705, 86706, 86707, 87340, 87341</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>   |
| <p><b>Hepatitis C Screening</b><br/> <b>USPSTF “B” Recommendation March 2020</b> The USPSTF recommends screening for hepatitis C virus infection in adults aged 18 to 79 years.</p>   | <p>86803, 86804, 87520, 87521 G0472</p> <p>Payable with a <a href="#">Pregnancy Diagnosis</a> or a diagnosis code in <a href="#">Diagnosis List 1</a></p>   |

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| <p><b>High Blood Pressure Screening in Adults</b><br/> <u>USPSTF “A” Recommendation April 2021</u><br/> The USPSTF recommends screening for high blood pressure in adults aged 18 years or older. The USPSTF recommends obtaining measurements outside of the clinical setting for diagnostic confirmation before starting treatment.</p>   | <p>99385, 99386, 99387, 99395, 99396, 99397</p> <p>Payable with any diagnosis</p> <hr/> <p>93784, 93786, 93788, 93790, 99473, 99474</p> <p>Reimbursable at the preventive level when billed with one of the following diagnosis codes: R03.0, R03.1, Z01.30, Z01.31</p> |
| <p><b>Human Immunodeficiency Virus (HIV) Infection Prevention Drug Pre-exposure Prophylaxis (PrEP)</b><br/> <u>USPSTF “A” Recommendation June 2019</u><br/> The USPSTF recommends that clinicians offer preexposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of HIV acquisition. See the Clinical Considerations section for information about identification of persons at high risk and selection of effective antiretroviral therapy.<br/> <u>USPSTF “A” Recommendation August 2023</u> The USPSTF recommends that clinicians prescribe preexposure prophylaxis using effective antiretroviral therapy to persons who are at increased risk of HIV acquisition to decrease the risk of acquiring HIV. Injectables are now added.</p> | <p>HIV/Creatine Testing 82565, 82570, 82575, 87534, 87535, 87536, 87537, 87538, 87539</p> <p>Diagnosis Codes HIV Related: Z11.4, Z71.7, B20</p> <p>or Payable with a <a href="#">Pregnancy Diagnosis</a></p>  |
| <p><b>Human Immunodeficiency Virus (HIV) Infection Screening for Non-Pregnant Adolescents and Adults</b><br/> <u>USPSTF “A” Recommendation June 2019</u> The USPSTF recommends that clinicians screen for HIV infection in adolescents and adults aged 15 to 65 years. Younger adolescents and older adults who are at increased risk should also be screened.<br/> <br/> <u>HRSA Recommendation June 2025</u><br/> Women’s Preventive Services Initiative</p>  | <p>87389, 87390, 87391, 87806, G0432, G0433, G0435 Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>  |

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| <p>recommends all adolescent and adult women, ages 15 and older, receive a screening test for HIV at least once during their lifetime. Earlier or additional screening should be based on risk, and rescreening annually or more often may be appropriate beginning at age 13 for adolescent and adult women with an increased risk of HIV infection. Women’s Preventive Services Initiative recommends risk assessment and prevention education for HIV infection beginning at age 13 and continuing as determined by risk.</p>   |   |
| <p><b>Human Immunodeficiency Virus (HIV) Infection Screening for Pregnant Women</b><br/> <u>USPSTF “A” Recommendation June 2019</u><br/> The USPSTF recommends that clinicians screen all pregnant persons, , including those who present in labor or at delivery whose HIVstatus is unknown.</p> <p><u>HRSA Recommendation June 2025</u><br/> <u>Women’s Preventive Services Initiative:</u><br/> A screening test for HIV is recommended for all pregnant women upon initiation of prenatal care with rescreening during pregnancy based on risk factors. Rapid HIV testing is recommended for pregnant women who present in active labor with an undocumented HIV status. Screening during pregnancy enables prevention of vertical transmission.</p> | <p>36415, 80081, 86689, 86701, 86702, 86703, 87389, 87390, 87391, 87806, G0432, G0433, G0435, G0475</p> <p>Payable with a <a href="#">Pregnancy Diagnosis</a> or a diagnosis code in <a href="#">Diagnosis List 1</a></p> |

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| <p><b>Intimate Partner Violence, Elder Abuse, and Abuse of Vulnerable Adults Screening</b> <u>USPSTF “B” Recommendation October 2018</u> The U.S. Preventive Services Task Force (USPSTF) recommends that clinicians screen for intimate partner violence in women of reproductive age and provide or refer women who screen positive to ongoing support services.</p> <p><b>Interpersonal and Domestic Violence Screening</b> <u>HRSA Recommendation June 2025</u> <u>WPSI</u> recommends screening adolescents and women for interpersonal and domestic violence, at least annually, and, when needed, providing or referring for initial intervention services. Interpersonal and domestic violence includes physical violence, sexual violence, stalking and psychological aggression (including coercion), reproductive coercion, neglect, and the threat of violence, abuse, or both. Intervention services include, but are not limited to, counseling, education, harm reduction strategies, and referral to appropriate supportive services.</p> | <p>99202, 99203, 99204, 99205, 99211,99212, 99213,99214, 99215, 99384, 99385,99386, 99387,99394, 99395, 99396, 99397,99401, 99402, 99403, 99404, 99411, 99412, 99417, S0610, S0612, S0613</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> |
| <p><b>Latent Tuberculosis Infection Screening</b> <u>USPSTF “B” Recommendation May 2023</u> The USPSTF recommends screening for latent tuberculosis infection (LTBI) in populations at increased risk.</p>  | <p>86480, 86481, 86580</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>  |
| <p><b>Lung Cancer Screening</b> <u>USPSTF “B” Recommendation March 2021</u>: The USPSTF recommends annual screening for lung cancer with low-dose screening for lung cancer with low-dose computed tomography (LDCT) in adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke</p>  | <p>G0296</p> <p>Payable with any diagnosis</p>   |

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| <p>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.</p>  | <p>71271</p> <p>Reimbursable at the preventive level (if it meets medical policy criteria and may require preauthorization) and is billed with one of the following diagnosis codes: F17.200, F17.201, F17.210, F17.211, F17.220, F17.221, F17.290, F17.291, Z12.2, Z87.891</p> |
| <p><b>Weight Loss to Prevent Obesity-Related Morbidity and Mortality in Adults: Behavioral Interventions</b><br/>USPSTF “B” Recommendation<br/>September 2018<br/>The USPSTF recommends that clinicians offer or refer adults with a body mass index (BMI) of 30 or higher (calculated as weight in kilograms divided by height in meters squared) to intensive, multicomponent behavioral interventions.</p>                           | <p>97802, 97803, 97804, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99078, G0447, G0473</p> <p>Payable with any diagnosis</p>   |
| <p><b>Obesity in Children and Adolescents Screening</b><br/><u>USPSTF “B” Recommendation June 2017</u><br/>The USPSTF recommends that clinicians screen for obesity in children and adolescents 6 years and older and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.</p>  | <p>97802, 97803, 99383, 99384, 99385, 99393, 99401, 99402, 99403, 99404, 99411, 99412, G0446, G0447, G0473</p> <p>Payable with any diagnosis</p>  |
| <p><b>Osteoporosis Screening</b><br/><u>USPSTF “B” Recommendation January 2025</u> The USPSTF recommends screening for osteoporosis to prevent osteoporotic fractures in women 65 years or older. The USPSTF recommends screening for osteoporosis to prevent osteoporotic fractures in postmenopausal women younger than 65 years who are at increased risk for an osteoporotic fracture as estimated by clinical risk assessment.</p> | <p>76977, 77078, 77080, 77081, 78350, 78351,</p> <p>G0130 Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>   |

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| <p><b>Perinatal Depression: Preventive Interventions</b><br/> <u>USPSTF “B” Recommendation</u><br/> February 2019<br/> The USPSTF recommends that clinicians provide or refer pregnant and postpartum persons who are at increased risk of perinatal depression to counseling interventions.</p>  | <p>99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 96160, 96161, G0444, 96127</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>               |
| <p><b>Phenylketonuria in Newborns Screening</b> <u>USPSTF “A” Recommendation</u> March 2008<br/> The USPSTF recommends screening for phenylketonuria in newborns.</p>   | <p>99381</p> <p>Payable with any diagnosis</p>   |
|   | <p>84030, S3620</p> <p>Reimbursable at the preventive level for children ages 0-90 days old</p>  |
| <p><b>Prediabetes and Type 2 Diabetes Screening</b> <u>USPSTF “B” Recommendation</u> August 2021<br/> The USPSTF recommends screening for prediabetes and type 2 diabetes in adults aged 35 to 70 years who have overweight or obesity. Clinicians should offer or refer patients with prediabetes to effective preventive interventions.</p> | <p>82947, 82948, 82950, 82951, 83036, 82952, 97802, 97803, 97804, 99401, 99402, 99403, 99404, G0270, G0271, G0447, G0473, S9470</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> |
| <p><b>Rh(D) Incompatibility Screening</b><br/> USPSTF “A” Recommendation<br/> February 2004<br/> The USPSTF strongly recommends Rh(D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care.</p>   | <p>80055, 86850, 86870, 86900, 86901, 36415</p> <p>Payable with a <a href="#">Pregnancy Diagnosis</a></p>  |

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| <p><b>Sexually Transmitted Infections Behavioral Counseling</b><br/> USPSTF “B” Recommendation August 2020 The USPSTF recommends behavioral counseling for all sexually active adolescents and for adults who are at increased risk for sexually transmitted infections (STIs).</p> <p><u>HRSA Recommendation June 2025:</u><br/> Women’s Preventive Services Initiative recommends directed behavioral counseling by a health care clinician or other appropriately trained individual for sexually active adolescent and adult women at an increased risk for STIs. Women’s Preventive Services Initiative recommends that clinicians review a woman’s sexual history and risk factors to help identify those at an increased risk of STIs. Risk factors include, but are not limited to, age younger than 25, a recent history of an STI, a new sex partner, multiple partners, a partner with concurrent partners, a partner with an STI, and a lack of or inconsistent condom use. For adolescents and women not identified as high risk, counseling to reduce the risk of STIs should be considered, as determined by clinical judgment.</p> | <p>99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, G0445</p> <p>Payable with any diagnosis</p>  |
| <p><b>Sickle Cell Disease (Hemoglobinopathies) in Newborns Screening:</b><br/> <b>USPSTF “A” Recommendation September 2007</b><br/> The USPSTF recommends screening for sickle cell disease in newborns.</p>   | <p>83020, 83021, 83030, 83033, 83051, 85004, 85013, 85014, 85018, 85025, 85027, 99381, G0306, G0307, S3620, S3850</p> <p>Payable with any diagnosis for children ages 0-30 days old</p> |

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| <p><b>Statin Use for the Primary Prevention of Cardiovascular Disease in Adults Preventive Medication</b></p> <p><u>USPSTF “B” Recommendation August 2022</u> The USPSTF recommends that clinicians prescribe a statin for the primary prevention of CVD for adults aged 40 to 75 years who have 1 or more CVD risk factors (i.e. dyslipidemia, diabetes, hypertension, or smoking) and an estimated 10-year risk of a cardiovascular event of 10% or greater.</p> | <p>80061, 82465, 83700, 83718, 83719, 83721,</p> <p>84478 Payable with any diagnosis</p>   |
| <p><b>Syphilis Infection in Nonpregnant Adults and Adolescents Screening</b></p> <p><u>USPSTF “A” Recommendation September 2022</u> The USPSTF recommends screening for syphilis infection in persons who are at increased risk for infection.</p>   | <p>86592, 86780, 0065U</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>  |
| <p><b>Syphilis Infection in Pregnant Women Screening</b></p> <p><u>USPSTF “A” Recommendation May 2025</u> The USPSTF recommends early, universal screening for syphilis infection during pregnancy; if an individual is not screened early in pregnancy, the USPSTF recommends screening at the first available opportunity.</p>   | <p>80055, 80081, 86592, 86593, 86780, 0065U, 36415</p> <p>Payable with a <a href="#">Pregnancy Diagnosis</a> or a diagnosis code in <a href="#">Diagnosis List 1</a></p> |

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| <p><b>Tobacco Smoking Cessation in Adults, Including Pregnant Women: Behavioral and Pharmacotherapy Interventions</b><br/> <u>USPSTF “A” Recommendation January 2021</u> The USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA)–approved pharmacotherapy for cessation to adults who use tobacco.</p> <p><u>USPSTF “A” Recommendation January 2021</u> The USPSTF recommends that clinicians ask all pregnant women about tobacco use, advise them to stop using tobacco, and provide behavioral interventions for cessation to pregnant women who use tobacco.</p> | <p>99401, 99402, 99403, 99404, 99406, 99407, G9016,<br/> S9453 Payable with any diagnosis</p>  |
| <p><b>Tobacco Use in Children and Adolescents Primary Care Interventions</b><br/> <u>USPSTF “B” Recommendation April 2020</u> The USPSTF recommends that primary care clinicians provide interventions, including education or brief counseling, to prevent initiation of tobacco use among school-aged children and adolescents.</p>  | <p>99401, 99402, 99403, 99404, 99406, 99407, G9016,<br/> S9453 Payable with any diagnosis</p>  |
| <p><b>Screening for Unhealthy Drug Use</b><br/> <u>USPSTF “B” Recommendation June 2020</u><br/> The USPSTF recommends screening by asking questions about unhealthy drug use in adults age 18 years or older. Screening should be implemented when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred.</p>  | <p>99385, 99386, 99387, 99395, 99396, 99397, 99408, 99409, G0396, G0397</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p> |

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| <b>Vision Screening in Children</b><br><u>USPSTF “B” Recommendation</u><br><u>September 2017</u><br>The USPSTF recommends vision screening at least once in all children aged 3 to 5 years to detect amblyopia or its risk factors. | 99172, 99173, 0333T<br><br>Payable with any diagnosis                                 |
| <b>General Lab Panel</b><br>These lab codes could be multiple Preventive Services recommendations.  | 80050, 80053<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a> |

**Contraceptive Methods and Counseling**  
**HRSA Recommendation June 2025**

Women's Preventive Services Initiative recommends that adolescent and adult women have access to the full range of contraceptives and contraceptive care to prevent unintended pregnancies and improve birth outcomes. Contraceptive care includes screening, education, counseling, and provision of contraceptives (including in the immediate postpartum period).

Contraceptive care also includes follow-up care (e.g., management, evaluation and changes, including the removal, continuation, and discontinuation of contraceptives). Women's Preventive Services Initiative recommends that the full range of U.S. Food and Drug Administration (FDA)- approved, granted, or -cleared contraceptives, effective family planning practices, and sterilization procedures be available as part of contraceptive care.

The full range of contraceptives includes those currently listed in the FDA's Birth Control Guide: (1) sterilization surgery for women, (2) implantable rods, (3) copper intrauterine devices, (4) intrauterine devices with progestin (all durations and doses), (5) injectable contraceptives, (6) oral contraceptives (combined pill), (7) oral contraceptives (progestin only), (8) oral contraceptives (extended or continuous use), (9) the contraceptive patch, (10) vaginal contraceptive rings, (11) diaphragms, (12) contraceptive sponges, (13) cervical caps, (14) condoms, (15) spermicides, (16) emergency contraception (levonorgestrel), and (17) emergency contraception (ulipristal acetate), and any additional contraceptives approved, granted, or cleared by the FDA.

Additionally, instruction in fertility awareness-based methods, including the

57170, 58300, 58301, 58600, 58605, 58611, 58615, 58661, 58565, 58670, 58671, 58700, 74740, 96372, 11976, A4261, A4264, A4266, A4268, A4269, A9293, J1050, J7296, J7297, J7298, J7300, J7301, J7303, J7304, J7306, J7307, A4267, S4981, S4989

Payable with any diagnosis

lactation amenorrhea method, although less effective, should be provided for women desiring an alternative method. condoms, (15) spermicides, (16) emergency contraception (levonorgestrel), and (17) emergency contraception (ulipristal acetate), and any additional contraceptives approved, granted, or cleared by the FDA. Additionally, instruction in fertility awareness-based methods, including the lactation amenorrhea method, although less effective, should be provided for women desiring an alternative method.

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|  | <p>58340</p> <p>Reimbursable at the preventive level only when accompanied with modifier 33 or one of the following diagnosis codes: Z30.2, Z30.40, Z30.42, Z30.49, Z98.51</p>   |
|  | <p>11981, 11982, 11983</p> <p>Covered only when FDA approved contraceptive implant insertion or removal are performed. Service is reimbursable at the preventive level when billed with one of the following diagnosis codes: Z30.013, Z30.017, Z30.018, Z30.019, Z30.09, Z30.40, Z30.42, Z30.46, Z30.49, Z30.8, Z30.9</p> |
|  | <p>58661, 58700</p> <p>Reimbursable at the preventive level with a diagnosis of Z30.2</p>  |
|  | <p>88302, 88305</p> <p>Reimbursable at the preventative level with diagnosis codes Z30.2, Z30.40, Z30.42, Z30.49, Z30.8 and Z30.9</p>  |

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| <p><b>Diabetes Screening after Pregnancy</b><br/> <u>HRSA Recommendation June 2025</u> 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 been previously 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 (e.g., 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.</p> | <p>82947, 82948, 82950, 82951, 83036</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>   |
| <p><b>Obesity Prevention in Midlife Women</b><br/> <u>HRSA Recommendation June 2025</u> Women’s Preventive Services Initiative recommends counseling midlife women aged 40 to 60 years with normal or overweight body mass index (BMI) (18.5-29.9 kg/m2) to maintain weight or limit weight gain to prevent obesity. Counseling may include individualized discussion of healthy eating and physical activity.</p>   | <p>97802, 97803, 97804, 99078, 99386, 99396, 99401, 99402, 99403, 99404, 99411, 99412, G0447, G0473</p> <p>Payable when billed with a diagnosis code in on <a href="#">Diagnosis List 1</a></p> |

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| <p><b>Well-Woman Visits</b><br/> <u>HRSA Recommendation June 2025</u><br/> Women’s Preventive Services Initiative recommends that women receive at least one preventive care visit per year beginning in adolescence and continuing across the lifespan to ensure the provision of all recommended preventive services, including preconception and many services necessary for prenatal and interconception care, are obtained. The primary purpose of these visits should be the delivery and coordination of recommended preventive services as determined by age and risk factors. These services may be completed at a single or as part of a series of visits that take place over time to obtain all necessary services depending on a woman’s age, health status, reproductive health needs, pregnancy status, and risk factors. Well- women visits also include pre-pregnancy, prenatal, postpartum and interpregnancy visits.</p> | <p>99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, G0101, G0438, G0439, 99078, 99401, 99402, 99403, 99404, 99411, 99412, 99408, 99409, G0396, G0442, G0443, G0444</p> <p>Payable with any diagnosis</p> <p>Also includes all lab tests administered as part of a normal pregnancy reimbursable at the preventive level when billed with a pregnancy diagnosis. Refer to <a href="#">Pregnancy Lab Tests</a> and the <a href="#">Pregnancy Diagnosis</a> code list.</p> |
| <p><b>Anemia Screening in Children</b><br/> <u>Bright Futures</u><br/> Recommends anemia screening for children under the age of 21 years of age.</p>   | <p>85014, 85018</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>   |
| <p><b>Hematocrit or Hemoglobin</b><br/> <u>Bright Futures</u><br/> Recommends hematocrit or hemoglobin screening for children and adolescents between the ages of four months and 21 years of age</p>   | <p>36415, 36416, 85014, 85018</p> <p>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a></p>   |
| <p><b>Critical Congenital Heart Defect Screening</b> <u>Bright Futures</u><br/> Recommends screening for critical congenital heart disease using pulse oximetry for newborns after 24 hours of age, before discharge from the hospital</p>  | <p>94760</p> <p>Payable with any diagnosis</p>   |

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| <b>Developmental Screening / Autism Screening</b><br><u>Bright Futures</u><br>Recommends developmental/autism screening for infants and young children between the ages of 9 months and 30 months | 96110<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a> for children ages 9 months - 30 months old   |
| <b>Hearing Screening</b><br><u>Bright Futures</u><br>Recommends hearing screenings for children and adolescents from birth through 21 years of age  | 92551, 92558, 92567, 92650, 92651, 92652, 92653, V5008<br><br>Payable at the preventive level only when billed with diagnosis codes Z01.10, Z01.118, and Z01.11 for ages 22 and under |
| <b>Lead Screening</b><br><u>Bright Futures</u><br>Recommends screening children between the ages of six months and six years for lead   | 36415, 36416, 83655<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a> for children ages 6 months - 6yrs old  |
| <b>Newborn Bilirubin</b>  | 82247, 82248, 88720<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>  |
| <b>Newborn Blood Screening</b>  | S3620<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>  |
| <b>Oral Health</b><br><u>Bright Futures</u><br>Recommends oral health risk assessments beginning at six months of age   | 99211, 99212, 99188, 99381, 99382, 99383,<br><br>99384 Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>  |
| <b>Preventive Medicine Services: New Patients</b>   | 99381, 99382, 99383, 99384, 99385<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>  |
| <b>Preventive Medicine Services: Established Patients</b>   | 99391, 99392, 99393, 99394, 99395<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>  |

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| <b>STI/HIV Screening</b><br><u>Bright Futures</u><br>Recommends screening for all sexually active patients                 | 86631, 86632, 86701, 86703, 87081, 87110, 87210, 87270, 87320, 87490, 87491, 87590, 87591, 87800, 87801, 87810, 87850, 36415<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a> |
| <b>Tuberculosis Testing</b><br><u>Bright Futures</u><br>Recommends tuberculosis testing if the risk assessment is positive | 86580, 99211<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>   |
| <b>Vision Screening</b><br><u>Bright Futures</u><br>Recommends vision screening for newborns through age 21 years          | 99173<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a>  |

#### ACIP Recommended Vaccinations:

| ACIP Recommendations:                       | Procedure Code(s):                                     |
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| COVID-19 Vaccine                            | 91318, 91319, 91320, 91321, 91322, 91304               |
| DTaP Vaccine                                | 90696, 90698, 90700, 90702, 90723                      |
| Hepatitis A Vaccine                         | 90632, 90633, 90634, 90636                             |
| Hepatitis B Vaccine                         | 90739, 90740, 90743, 90744, 90746, 90747, 90748, 90759 |
| Haemophilus Influenzae Type B (Hib) Vaccine | 90647, 90648   |

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|---|--|
| Human Papillomavirus Vaccine<br><br>(HPV) Influenza Vaccine                         | 90649, 90650, 90651<br><br>Payable with a diagnosis code in <a href="#">Diagnosis List 1</a><br><br>90630, 90637, 90638, 90653, 90654, 90655, 90656,<br>90657, 90658, 90660, 90661, 90662, 90666, 90667, 90668,<br>90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688,<br>90689, 90694, 90695, 90756 Q2034, Q2035, Q2036,<br>Q2037, Q2038, Q2039 |
| Measles, Rubella, Congenital Rubella Syndrome, and Mumps (MMR)                      | 90707  |
| Measles, Mumps, Rubella, and Varicella (MMRV)                                       | 90710  |
| Meningococcal Vaccine   | 90644, 90733, 90734, 90619, 90620, 90621, 90623  |
| Monkeypox Vaccine   | 90611  |
| Pneumococcal Vaccine  | 90670, 90671, 90677, 90684, 90732,   |
| Polio Vaccine   | 90713  |
| Respiratory Syncytial Virus Immunization  | 90380, 90381, 90679, 90678   |
| Rotavirus Vaccine   | 90680, 90681   |
| Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis Vaccine (Tdap/Td) | 90714, 90715   |
| Varicella Vaccine   | 90716  |
| Zoster (Shingles) Vaccine   | 90736, 90750   |

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| Immunization Administration | 90460, 90461, 90471, 90472, 90473, 90474, 90749, 90480, 96380, 96381 |
|-----------------------------|--|

| Diagnosis List 1 | Diagnosis Description  |
|------------------|--|
| R73.03           | Abnormal Glucose: Prediabetes  |
| Z00.00           | Encounter for general adult medical examination without abnormal findings                                |
| Z00.01           | Encounter for general adult medical examination with abnormal findings                                   |
| Z00.110          | Health examination for newborn under 8 days old  |
| Z00.111          | Health examination for newborn 8 to 28 days old  |
| Z00.121          | Encounter for routine child health examination with abnormal findings                                    |
| Z00.129          | Encounter for routine child health examination without abnormal findings                                 |
| Z00.3            | Encounter for examination for adolescent development state   |
| Z00.8            | Encounter for other general examination  |
| Z01.411          | Encounter for gynecological examination (general) (routine) with abnormal findings                       |
| Z01.419          | Encounter for gynecological examination (general) (routine) without abnormal findings                    |
| Z01.42           | Encounter for cervical smear to confirm findings of recent normal smear following initial abnormal smear |
| Z02.83           | Encounter for blood-alcohol and blood-drug test  |
| Z11.1            | Encounter for screening for respiratory tuberculosis   |
| Z11.3            | Encounter for screening for infections with a predominantly sexual mode of transmission                  |
| Z11.4            | Encounter for screening for human immunodeficiency virus [HIV]   |

|         |   |
|---------|---|
| Z11.51  | Encounter for screening for human papillomavirus (HPV)  |
| Z11.59  | Encounter for screening for other viral diseases  |
| Z11.7   | Encounter for testing for latent tuberculosis infection   |
| Z11.8   | Encounter for screening for other infectious and parasitic diseases   |
| Z12.10  | Encounter for screening for malignant neoplasm of intestinal tract, unspecified   |
| Z12.13  | Encounter for screening for malignant neoplasm of small intestine   |
| Z12.11  | Encounter for screening for malignant neoplasm of colon   |
| Z12.12  | Encounter for screening for malignant neoplasm of rectum  |
| Z12.2   | Encounter for screening for malignant neoplasm of respiratory organs  |
| Z12.31  | Encounter for screening mammogram for malignant neoplasm of breast  |
| Z12.39  | Encounter for other screening for malignant neoplasm of breast  |
| Z12.4   | Encounter for screening for malignant neoplasm of cervix  |
| Z12.5   | Encounter for screening for malignant neoplasm of prostate  |
| Z13.0   | Encounter for screening for diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism |
| Z13.1   | Encounter for screening for diabetes mellitus   |
| Z13.220 | Encounter for screening for lipid disorders   |

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|---------|--|
| Z13.31  | Encounter for screening for depression   |
| Z13.32  | Encounter for screening for maternal depression  |
| Z13.40  | Encounter for screening for unspecified developmental delays   |
| Z13.41  | Encounter for autism screening   |
| Z13.42  | Encounter for screening for global developmental delays (milestones)                                 |
| Z13.5   | Encounter for screening for eye and ear disorders  |
| Z13.6   | Encounter for screening for cardiovascular disorders   |
| Z13.820 | Encounter for screening for osteoporosis   |
| Z20.2   | Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission |
| Z20.6   | Contact with and (suspected) exposure to human immunodeficiency virus [HIV]                          |
| Z23     | Encounter for immunization   |
| Z30.011 | Encounter for initial prescription of contraceptive pills  |
| Z30.012 | Encounter for prescription of emergency contraception  |
| Z30.013 | Encounter for initial prescription of injectable contraceptive                                       |
| Z30.014 | Encounter for initial prescription of intrauterine contraceptive device                              |
| Z30.015 | Encounter for initial prescription of vaginal ring hormonal contraceptive                            |

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| Z30.016 | Encounter for initial prescription of transdermal patch hormonal contraceptive device |
| Z30.017 | Encounter for initial prescription of implantable subdermal contraceptive             |
| Z30.018 | Encounter for initial prescription of other contraceptives                            |
| Z30.019 | Encounter for initial prescription of contraceptives, unspecified                     |
| Z30.02  | Counseling and instruction in natural family planning to avoid pregnancy              |
| Z30.09  | Encounter for other general counseling and advice on contraception                    |
| Z30.40  | Encounter for surveillance of contraceptives, unspecified                             |
| Z30.41  | Encounter for surveillance of contraceptive pills                                     |
| Z30.42  | Encounter for surveillance of injectable contraceptive                                |
| Z30.430 | Encounter for insertion of intrauterine contraceptive device                          |
| Z30.431 | Encounter for routine checking of intrauterine contraceptive device                   |
| Z30.432 | Encounter for removal of intrauterine contraceptive device                            |
| Z30.433 | Encounter for removal and reinsertion of intrauterine contraceptive device            |
| Z30.44  | Encounter for surveillance of vaginal ring hormonal contraceptive device              |
| Z30.45  | Encounter for surveillance of transdermal patch hormonal contraceptive device         |
| Z30.46  | Encounter for surveillance of implantable subdermal contraceptive                     |

|        |   |
|--------|---|
| Z30.49 | Encounter for surveillance of other contraceptives                          |
| Z30.8  | Encounter for other contraceptive management                                |
| Z30.9  | Encounter for contraceptive management, unspecified                         |
| Z32.2  | Encounter for childbirth instruction  |
| Z71.3  | Dietary counseling and surveillance   |
| Z71.41 | Alcohol abuse counseling and surveillance of alcoholic                      |
| Z71.51 | Drug abuse counseling and surveillance of drug abuser                       |
| Z71.6  | Tobacco abuse counseling  |
| Z71.7  | Human immunodeficiency virus [HIV] counseling                               |
| Z71.82 | Exercise counseling   |
| Z71.83 | Encounter for non-procreative genetic counseling                            |
| Z73.9  | Problem related to life management difficulty, unspecified                  |
| Z76.1  | Encounter for health supervision and care of foundling                      |
| Z76.2  | Encounter for health supervision and care of other healthy infant and child |
| Z76.81 | Expectant parent(s) prebirth pediatrician visit                             |
| Z80.0  | Family history of malignant neoplasm of digestive organs                    |

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| Z82.62  | Family history of osteoporosis  |
| Z83.3   | Family history of diabetes mellitus   |
| Z83.42  | Family history of familial hypercholesterolemia   |
| Z83.71  | Family history of colonic polyps  |
| Z85.038 | Personal history of other malignant neoplasm of large intestine                         |
| Z85.048 | Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus |
| Z85.3   | Personal history of malignant neoplasm of breast  |
| Z85.43  | Personal history of malignant neoplasm of ovary   |
| Z86.32  | Personal history of gestational diabetes  |
| Z97.5   | Presence of (intrauterine) contraceptive device   |
| Z13.4   | Encounter for screening for certain developmental disorders in childhood                |
| Z80.42  | Family history of malignant neoplasm of prostate  |
| Z13.88  | Encounter for screening for disorder due to exposure to contaminants                    |
| Z31.5   | Encounter for procreative genetic counseling  |

## Pregnancy Diagnosis Code List

| Diagnosis Code List |
|---------------------|
| O00.00 - O48.1      |

## Pregnancy Lab Tests

| Lab Test CPT/HCPC  |
|--|
| 86729, 86592, 86593, 80081, 86780, 3512F, 86631, 86632, 87110, 87270, 87320, 87485, 87486, 87487, 87490, 87491, 87492, 3511F, 87810, 81507, 81422, 82105, 82106, 82107, 84112, S3626, 3294F, 90715, 90655, 90656, 90657, 90658, 90660, 90662, 90663, 90686, G8482, 81223, 81222, 81221, 81220, 81224, 81412, 81443, 81336, 81337, 81173, 81174, 81329, 81204, 81362, 81363, 81364, 81361, 85025, 85027, 80055, 80050, 99408, 99409, H0049, H0050, 80100, 80101, 80102, 80103, 80300, 80301, 80302, 80303, 80304, 80320, 80321, 80322, 80375, 80376, 80377, 82009, 82010, 82075, 3016F, 4158F, 4290F, 4320F, G0431, G0442, G0443, G9621, G9622, H0001, H0003, H0006, H0007, H0008, H0009, H0014, H0021, H0022, H0029, H0047, H2035, T1006, T1007, T1012, G0480, G0481, G0482, G0483, 99492, 99493, 99494, 99484, 99483, 96156, 99401, 99402, 99403, 99404, 99411, 99412 |

## Additional Information

### Breastfeeding Equipment & Supplies

As part of preventive care benefits, Oxbridge Health Plan covers manual, electric, and hospital-grade breast pumps, as well as breastfeeding supplies\*. Please note that breast pumps purchased or rented from out of network providers will be reimbursed at the out of network level. Always refer to your group coverage policy for any restrictions or limitations.

\*The following breast pump supplies are covered at the preventive level:

- A4281- Tubing for breast pump, replacement, spare membranes, replacements
- A4282- Adapter for breast pump, replacement
- A4283- Cap for breast pump bottle, replacement
- A4284- Breast shield and splash protector for use with breast pump, replacement
- A4285- Polycarbonate bottle for use with breast pump, replacement
- A4286- Locking ring for breast pump, replacement

Reimbursement is up to \$200 for the purchase or rental of non-participating breastfeeding supplies 1 time per birth .

The following table outlines details for manual, electric and hospital grade breast pumps:

| Breast Pump Type | Procedure Code | Coverage & Acquisition Details   | Purchase/<br>Rental Limits                        | Additional Notes   |
|------------------|----------------|--|---|--|
| Manual           | E0602          | Covered at the preventive level when purchased in-network, out-of-network or from retail providers. Sales tax is excluded from retail purchases.   | One manual breast pump per pregnancy              |  |
| Electric         | E0603          | Covered at the preventive level when rented or purchased from an in-network provider or a contracted durable medical equipment (DME) company. Only certain models are covered at the preventive level. | One electric breast pump per pregnancy            | <p>Retail providers (e.g., Target, Walmart, online vendors) are considered out-of-network and thus follow the plan's out-of-network preventive benefit levels. Copays and additional cost-sharing may be applicable.</p> <p>If a member selects an upgraded model, then the member may be subject to additional fees equivalent to the difference between the cost of the standard model and the upgraded model.</p> |
| Hospital Grade   | E0604          | Covered at the preventive level when rented from an in-network provider or a contracted durable medical equipment (DME) company. The breast pump must be returned at the end of the coverage period.   | One hospital grade breast pump per benefit period | Coverage is limited to a maximum of \$1,000 or a rental period of up to 12 months (whichever is less).   |

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"United States Preventive Services Task Force. "Published Recommendations." Retrieved June 18, 2025, from <https://www.uspreventiveservicestaskforce.org/BrowseRec/Index/browse-recommendations>"