BlueCross BlueShield of North Carolina

Health Care Reform Preventive Services Coding Guide

The Patient Protection and Affordable Care Act (PPACA) and the Health Care and Education Reconciliation Act of 2010 (HCERA) has designated the services listed below as preventive benefits and available with no cost-sharing when provided by an in-network provider for members of non-grandfathered health plans. In addition to the services listed below, your patient may have additional preventive care benefits covered under their health plan that may or may not be covered at 100%. Your patient should check their benefit booklet for details on these additional preventive care benefits. The following tables provide a quick reference guide for submitting claims for preventive services with a "well-person" diagnosis code as the primary (first) diagnosis on the claim. This information is intended as a reference tool for your convenience and is not a guarantee of payment. **This guide is subject to change based on new or revised laws and/or regulations, additional guidance and/or BCBSNC medical policy.**

IMPORTANT INFORMATION: Services must be billed with the appropriate diagnosis, at the line level of the claim (Block 24E), pursuant to industry standard coding guidelines. Preventive or screening services are intended for those who currently exhibit no signs or symptoms of disease. Services otherwise deemed preventive that are received in an inpatient setting, an emergency room, or that include additional procedures or diagnostic services may be subject to copayment, deductible and coinsurance. Submitting screening service codes (CPT, HCPCs, ICD-9 or ICD-10) when signs or symptoms are present constitutes inappropriate coding which could result in recoupment of monies paid to the provider for those services. Additionally, these services are subject to certain limitations depending on medical necessity, reimbursement policies and correct coding initiatives. If you have questions, please contact the **Provider Blue Line at 1-800-214-4844.**

Grade A and B Recommendations of U.S. Preventive Services Task Force (USPSTF) currently effective unless otherwise noted	**CPT or HCPCS**	**ICD-10 Diagnosis**	**Comments**
Screening for Abdominal Aortic Aneurysm (one time screening for abdominal aortic aneurysm by ultrasonography in men ages 65-75 who have ever smoked)	76706	Z13.6	
Screening and counseling to reduce unhealthy alcohol use The USPSTF recommends that clinicians screen adults aged 18 years or older, including pregnant women for unhealthy alcohol use and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce alcohol misuse.	99408, 99409, G0442 or G0443, G0396, G0397 G2011	Z13.89, F10.10, F10.120, F10.129	These codes are to be used in the absence of a wellness visit.
Anxiety screening (screening for anxiety in adult 64 years or younger, including those who are pregnant or postpartum)	Part of preventive visit or 99401, 99402, 99403, 99404	Z00.00, Z00.01, Z01.411, Z01.419	Annual 99401-99404 are to be used in the absence of a wellness visit.
Screening for bacteriuria (screening for asymptomatic bacteriuria with urine culture for pregnant women at 12 - 16 weeks' gestation or at the first prenatal visit, if later)	87081, 87084, 87086 or 87088	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292,O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212,O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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,O09.811, O09.812,O09.813, O09.819,09.821,O09.822,O09.823,O09.829,O36.80X0,O36.80X1,O36.80X2, O36.80X3,O36.80X4, O36.80X5,O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93 O09.A0, O09.A1, O09.A2, O09.A3	Dipstick or other urinalysis included in global maternity visits. Only urine culture part of preventive services mandate. **NOTE: Z33.1 is not an acceptable principle diagnosis code**.
Screening for high blood pressure (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)	99385-99387 or 99395-99397 **For ambulatory blood pressure monitoring use** 93784, 93786, 93788, 93790 **For home blood pressure monitor use** A4670	Z13.6 or other wellness exam diagnosis code For coverage of ABPM or HBPM diagnosis code R03.0 is required	Part of wellness office visit. **Effective 1/1/2017,** ambulatory blood pressure monitoring(ABPM) or home blood pressure monitors (HBPM) for confirmation of high blood pressure is covered at 100%. Home blood pressure monitors must be purchased from an in-network durable medical equipment (DME) vendor.

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Counseling related to BRCA screening (Primary care clinicians should 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 positive screening results should receive generic counseling and, if indicated after counseling, BRCA testing.)	Referrals for counseling included in wellness visit codes 99385-99387, 99395-99397 Counseling services use ~~96040~~, 99401, 99402, 99403, 99404, or S0265 Effective 1/1/25 use 96041 Genetic testing use 81212, 81215, 81216, 81217 or 81162 81163, 81164, 81165,81166, 81167	Z80.3, Z80.41, Z85.07, Z85.3, Z85.43, Z85.44, Z85.46, or Z71.83	Services for BRCA 1/BRCA 2 testing will be provided with no cost sharing to appropriate groups when the medical policy criteria are met. See BCBSNC Medical Policy: Genetic Testing for Breast and Ovarian Cancer 99401-99404 are to be used in the absence of a wellness visit.
Screening for breast cancer [mammography] (for women aged 40 or over every 1-2 yrs , with or without clinical breast examination) Women may require additional imaging to complete the screening process or to address findings on the initial screening mammography. If additional imaging [e.g., magnetic resonance imaging (MRI), ultrasound, mammography] and pathology evaluation are indicated, these services also are recommended to complete the screening process for malignancies.	Screening Mammogram 77067, 77063 **Additional imaging to complete the screening process** **Diagnostic Mammogram** 77061, 77062, 77065, 77066, G0279 **Breast Ultrasound** 76641, 76642 **Breast MRI** 77046, 77047, 77048, 77049, A9575, A9576,A9577, A9578, A9579, A9581, A9585 Pathology Evaluation 19081, 19082, 19083, 19084 ,19085, 19086, 19100, 19101, 19281, 109282, 19283, 19284, 19285, 19286, 19287, 19288, 76942, 77002, 88305	Z12.31, Z12.39 **Diagnosis codes required for additional imaging/pathology to complete the screening process** R92.0, R92.1, R92.2, R92.8, R92.30, R92.311, R92.312, R92.311, R62.312, R62.313, R92.321, R92.322,R92.323, R92.331, R92.332, R92.333, R92.341, R92.342, R92.343, Z12.31, Z12.39	If the patient has had an abnormal mammogram in the past, subsequent routine mammograms may be coded as diagnostic: 77061, 77062, 77065, 77066, G0279 with a diagnosis reflective of the abnormality. **Effective 1/1/2026 or upon renewal** Additional imaging and pathology to complete the screening process will be provided with no cost sharing
Chemoprevention of breast cancer (Recommends that clinicians engage in shared, informed decision making with women who are at increased risk for breast cancer about medications to reduce their risk. For women who are at increased risk for breast cancer and at low risk for adverse medication effects, clinicians should offer to prescribe risk-reducing medications, such as tamoxifen or raloxifene)	99401-99402 or is included in wellness visit 99385-99387, 99395-99397	Z15.01, Z80.3, D24.1, D24.2, D24.9, N60.81, N60.82, N60.89	This recommendation applies to asymptomatic women aged 35 years or older without a prior diagnosis of breast cancer, ductal carcinoma in situ, or lobular carcinoma in situ. Generic risk-reducing medications are dispensed to member with a physician order with no cost-sharing. For members who have swallowing problems or may have an intolerance to generic products, brand products may also be made available by completing the Copay Waiver Form and faxing it to the number on the bottom of the document. 99401-99402 are to be used in the absence of a wellness visit. NOTE: Z15.01 is not an acceptable principle diagnosis
Interventions to support breast feeding (interventions during pregnancy and after birth to promote and support breastfeeding)	99401-99403 or part of other office visit	O30.93, Z34.03, Z34.83, Z34.93, Z39.1	99401-99403 are to be used in the absence of a wellness visit.

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Screening for cervical cancer (In women age 21–65 with cervical cytology (pap test/smear) every 3 years For women age 30–65, A Pap test every 3 years or a Pap test and high-risk human papillomavirus (hrHPV) test every 5 years or HPV test only every 5 years)	88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88164, 88165, 88166, 88167, 88174, 88175, 87623, 87624, 87625, G0101, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001	Z00.00, Z00.01, Z01.411, Z01.419, Z01.42, Z12.4, Z11.51	This recommendation does not apply to women who have received a diagnosis of a high-grade precancerous cervical lesion or cervical cancer, women with in utero exposure to diethylstilbestrol, or women who are immunocompromised (such as those who are HIV positive).
Screening for chlamydial infection in non-pregnant and pregnant women (for all sexually active non-pregnant and pregnant young women ages 24 and younger and for older, non-pregnant and pregnant women who are at increased risk)	87270, 87320, 87490, 87491 and 87810 **Effective 8/15/2024** 87801	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z11.8, O09.A0, O09.A1, O09.A2, O09.A3, Z11.3	**NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Screening for cholesterol abnormalities: ***men 35 and older** (for lipid disorders) ***men younger than 35** (for ages 20-35 for lipid disorders if they are at increased risk for coronary heart disease) ***women 20 and older** (for lipid disorders if they are at increased risk for coronary heart disease) **See also: Statin Use for the Primary Prevention of Cardiovascular Disease in Adults**	80061, 82465 or 83718	Z13.220	Do not bill the panel lab code in addition to separate tests included in the panel.
Prevention of dental caries (recommends that primary care clinicians prescribe fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluoride. Also 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.)	99188, 99401 or 99402 May prescribe oral fluoride during child wellness visit: 99381-99382 or 99391-99392 with appropriate wellness diagnosis	Z29.3	Fluoride varnish will not be covered beyond the 5th birthday. Oral fluoride supplementation will be covered from ages 6 months through 16 years. BCBSNC recommends counseling/education in addition to varnish application. • For well child visit: Any counseling services received at the time of a well child visit are considered part of the preventive visit and are not reimbursed separately. • For sick visit: If the varnish is applied during a visit other than for wellness, providers should reference diagnosis code Z41.8 or **Z29.3** as the primary diagnosis for the line item of the varnish application service, 99188, on the claim in order to process correctly. If education/counseling on prevention and risk factor reduction of dental caries is conducted during a sick visit, providers should again reference diagnosis code Z41.8 or **Z29.3** as the primary diagnosis for the line item of the counseling service, 99401/99402, on the claim in order to process correctly. BCBSNC will disallow D codes if submitted by non licensed dental providers 99401-99402 are to be used in the absence of a wellness visit.

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Screening for colorectal cancer (using fecal occult blood testing, sigmoidoscopy, or colonoscopy, in adults beginning at ages **45**-75) Age change effective for eligible members by April 1, 2022	**Fecal occult blood testing:** 82270, 82274 or G0328 **FIT DNA**: 81528 **Sigmoidoscopy:** 45330, 45333, 45334, 45338, G0104 , G6022, 88305 and **Effective 1/1/2017** G0500 **Colonoscopy**: 45378, 45380, 45381, 45382, 45384, 45385, 74263, G0105, G0121, G6024, 00812, 88305 and G0500 **Effective 1/1/2023** 45390 **Consultation or office visit prior to screening colonoscopy**: S0285	**Screening Procedures:** Z12.11, Z12.12, K51.40, K62.1, K63.5, D12.0, D12.2, D12.3, D12.4, D12.5, D12.6, D12.7, D12.8, or D12.9 **Pathology services (88305):** Z12.11, Z12.12, K51.40, K62.1, K63.5, D12.0, D12.2, D12.3, D12.4, D12.5, D12.6, D12.7, D12.8, or D12.9 **Visit or Consultations:** Z01.818	Colorectal cancer screening mandate does not include barium enema. ***If a test is performed for screening purposes, screening service codes may be submitted even in the event of positive findings e.g., polyp found during a screening colonoscopy. It is critical to use a screening diagnosis as the primary diagnosis for the claim line of the test performed [not just in the header diagnoses]. Any abnormal findings from a screening test should be listed as a secondary diagnosis code. Failure to list screening as the primary diagnosis code will affect correct claim adjudication. **Effective 6/1/2022:** If a colonoscopy is performed following a positive stool based (FIT, Cologuard) or direct visualization test (sigmoidoscopy or CT colonography), it is critical to use a screening diagnosis as the primary diagnosis for the claim line of the test performed [not just in the header diagnoses]. Any abnormal findings from a screening test should be listed as a secondary diagnosis code. Failure to list screening as the primary diagnosis code will affect correct claim adjudication. . **As of 9/1/2016,** Certain bowel preparation medications, when medically appropriate and prescribed by a health care provider are allowed without cost sharing when dispensed at a participating pharmacy. If there is a medical reason a member cannot take a generic bowel preparation, the physician should review the clinical criteria and if appropriate, submit fax form. **As of 1/1/2017**, Moderate sedation (G0500) performed by the physician performing the procedure is allowed but cannot be billed on the same DOS as 00812.
Screening for depression: ***adults** (screening for depression, including pregnant and postpartum women, when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment, and follow-up) ***adolescents** (screening 12-18 yr olds for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy [cognitive-behavioral or interpersonal], and follow-up)	G0444 or preventive visit	**Z13.31**	Part of any problem or preventive office visit.
Screening for diabetes Screening for abnormal blood glucose as part of cardiovascular risk assessment. Clinicians should offer or refer patients with abnormal blood glucose to intensive behavioral counseling interventions to promote a healthful diet and physical activity. Adults aged 40 to 70 who are overweight or obese	82947 or 83036	Z13.1,	
Behavioral Counseling to promote a healthful diet and physical activity for cardiovascular disease prevention in adults with cardiovascular risk factors (Recommends offering or referring adults with cardiovascular disease (CVD) risk factors behavioral counseling interventions to promote a healthy diet and physical activity)	99402, 99403, 99404, 97802, 97803, 97804, S9452, S9470, G0270, G0271, G0108, G0109, S9140, S9141, S9455, S9460, S9465, G0446 or part of preventive visit	Z71.3	99402-99404 are to be used in the absence of a wellness visit.
Fall Prevention (Exercise interventions to prevent falls in community-dwelling adults 65 years or older who are at increased risk for falls.)	97001-97002, 97110, 97112, 97116, 97530, G0151, G0157, G0159, S9131 and S9476.	Z91.81	
Supplementation with folic acid (for all women planning or capable of pregnancy to take a daily supplement containing 0.4 - 0.8 mg [400-600 mcg] of folic acid)	Not applicable, administered through Pharmacy	Not applicable, administered through Pharmacy	OTC folic acid supplements are dispensed to member with a physician order with no cost-sharing.

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Screening for Gestational Diabetes Mellitus (Recommends screening for gestational diabetes mellitus (GDM) in asymptomatic pregnant women after 24 weeks of gestation.)	82950	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93 O09.A0, O09.A1, O09.A2, O09.A3	In pregnant women between 24 and 28 weeks of gestation and at the first prenatal visit for pregnant women identified to be at high risk for diabetes **NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Screening for gonorrhea for women (all sexually active women, including those who are pregnant if they are at increased risk for infection [if they are young or have other individual or population risk factors])	87590-87591 and 87850 **Effective 8/15/2024** 87801	Z11.59, Z11.3, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z11.8 O09.A0, O09.A1, O09.A2, O09.A3	**NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Prophylactic medication for gonorrhea: newborns (ocular topical medication for all newborns against gonococcal ophthalmia neonatorum)	Not applicable, administered through Facility	Not applicable, administered through Facility	This medication is generally administered to newborn at birth facility.
Healthy Weight and Weight Gain In Pregnancy: Behavioral Counseling Interventions (For pregnant adolescents and adults: Offer effective behavioral counseling interventions aimed at promoting healthy weight gain and preventing excess gestational weight gain in pregnancy.)	99402, 99403, 99404, 97802, 97803, 97804, S9452, S9470, G0270, G0271or part of preventive visit	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, Z71.3	NOTE: Z33.1 is not an acceptable principle diagnosis code.
Screening for hearing loss (in all newborn infants)	92558, 99381, 99391 or 92586	Z00.121, Z00.129, Z00.110, Z00.111, Z01.10, Z01.118	Service is typically performed in the birth facility or as part of a wellness office visit in the event of a home birth. CPT code **92586** cannot be billed by professional provider in a facility setting
Screening for hemoglobinopathies (for sickle cell disease in newborns)	83020, 83021, 85660 and S3620	Z13.0	Service is typically performed in the birth facility or as part of a wellness office visit in the event of a home birth.
Screening for Hepatitis B (in pregnant women at first prenatal visit and in persons at high risk for infection.)	80055 , 87340 or 80081	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z11.59 O09.A0, O09.A1, O09.A2, O09.A3	**NOTE: Z33.1 is not an acceptable principle diagnosis code.**

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Grade A and B Recommendations of U.S. Preventive Services Task Force (USPSTF) currently effective unless otherwise noted	CPT or HCPCS	ICD-10 Diagnosis	Comments
Screening for hepatitis C virus (HCV) infection (for persons at high risk for infection.) The USPSTF also recommends offering one-time screening for HCV infection to adults aged 18 to 79..	G0472 Effective 4/1/2025 G0567	Z72.51, Z72.52, Z72.53, Z11.59, Z11.4, F10.10, F10.20, F10.21, F10.229, F11.10, F11.20, F11.21, F12.10, F12.20, F12.21, F13.10, F13.20, F13.21, F14.10, F14.20, F14.21, F15.10, F15.129, F15.20, F15.21, F16.10, F16.129, F16.20, F16.21, F17.200, F18.10, F19.10, F19.20, F19.21, F55.2	
Screening for HIV (on all adolescents ages 15 to 65 years, younger adolescents and older adults who are at increased risk, and all pregnant women including those who present in labor who are untested and whose HIV status is unknown)	G0432, G0433, G0435, OR G0475	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z11.4 O09.A0, O09.A1, O09.A2, O09.A3	**NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Screening for congenital hypothyroidism (in newborns)	99381 or 99391	Z13.29	Service is typically performed in the birth facility or as part of a wellness office visit in the event of a home birth.
Screening for iron deficiency anemia (in asymptomatic pregnant women)	80055, 85013, 85014, 85018, 85025, 85027 or 80081	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93 O09.A0, O09.A1, O09.A2, O09.A3	**NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Iron supplementation in children (routine iron supplementation for asymptomatic children 6-12 mo of age who are at increased risk for iron deficiency anemia)	Not applicable, administered through Pharmacy	Not applicable, administered through Pharmacy	OTC iron supplements are dispensed to member with a physician order with no cost-sharing.
Screening for latent tuberculosis (asymptomatic adults 18 years and older at increased risk for tuberculosis)	86480, 86481, 86580	Z11.1	Mandate effective 10/1/2017
Low-Dose Aspirin Use for the Prevention of Morbidity and Mortality From Preeclampsia (Recommends the use of low-dose aspirin (81 mg/d) as preventive medication after 12 weeks of gestation in women who are at high risk for preeclampsia.)	Not applicable, administered through Pharmacy	Not applicable, administered through Pharmacy	OTC Aspirin (81 mg) is dispensed to member with a physician order at a participating pharmacy with no cost-sharing.
Screening for Lung Cancer (Recommends annual screening for lung cancer with low-dose computed tomography (LDCT) in adults aged 50 to 80 yrs who have a 20pack-year smoking history and currently smoke or have quite 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.)	71271	F17.210, F17.211, F17.213, F17.218, F17.219, Z72.0, and Z87.891	
Screening for and Management of Obesity in Adults (screen all adults; clinicians should offer or refer patients with a body mass index (BMI) of 30 kg/m2 or higher to intensive, multi-component behavioral interventions.)	99385, 99386, 99387, 99395, 99396, 99397, 96150, 96151, 96152, 96153, 99401, 99402, 99403, 99404, G0447 or G0473	Z00.00, Z00.01, Z13.89, Z68.30, Z68.31, Z68.32, Z68.33, Z68.34, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.9, E66.01, E66.09, E66.1, E66.8, Z13.220, Z13.228, Z13.29	99401-99404 are to be used in the absence of a wellness visit. **NOTE: Z68.30, Z68.31, Z68.32, Z68.33, Z68.34, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45 are not acceptable principle diagnosis codes**.

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Screening and counseling for obesity: children (screen children aged 6 yrs and older for obesity and offer/refer to comprehensive, intensive behavioral interventions to promote improvement in weight status)	99383-99384, 99393, 99394, 99401, 99402, 99403, 99404, G0447 or G0473	Z00.121, Z00.129, Z00.110, Z00.111, Z13.89, Z13.220, Z13.228, Z13.29	99401-99404 are to be used in the absence of a wellness visit.
Screening for osteoporosis (screen women aged 65 and older for osteoporosis and in younger postmenopausal women who are at increased risk of osteoporosis, as determined by a formal clinical risk assessment tool.)	77080 or 77081	Z13.820	This recommendation uses only DEXA scans for testing.
Screening for PKU (in newborns)	84030	Z13.228	Service is typically performed in the birth facility or as part of a wellness office visit in the event of a home birth. 84030 is to be used in the absence of a panel which includes this test.
Screening for preeclampsia	Performed as part of routine prenatal visit	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93 O09.A0, O09.A1, O09.A2, O09.A3	Service is performed as part of routine prenatal visit not separately reimbursable **NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Screening for Rh incompatibility: ***first pregnancy visit** (recommends Rh (D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care) ***24-28 weeks gestation** (recommends repeated Rh (D) antibody testing for all unsensitized Rh (D)-negative women at 24-28 weeks gestation unless the biological father is known to be Rh (D)-negative)	86850, 80055 or 80081	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93 O09.A0, O09.A1, O09.A2, O09.A3	Initial testing is part of the obstetric panel. Use 86850 only if performed separately from the panel for repeat testing. **NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Counseling for Sexually Transmitted Infections (recommends high-intensity behavioral counseling to prevent STIs for all active adolescents and for adults at increased risk for STIs)	G0445, 99383, 99384, 99385, 99386, 99387, 99393, 99394, 99395, 99396, 99397 or 99401, 99402, 99403, 99404	Z71.7, Z71.89, Z72.51, Z72.52, Z72.53	99401-99404 are to be used in the absence of a wellness visit.
Behavioral Counseling to Prevent Skin Cancer (Counseling young adults, adolescents, children, and parents of young children about minimizing exposure to UV radiation for persons aged 6 months to 24 years with fair skin types to reduce their risk of skin cancer)	99383, 99384, 99385, 99393, 99394, 99395	Z00.121, Z00.129, Z00.110, Z00.111, Z00.00, Z00.01	Considered part of wellness office visit.
Screening for syphilis: ***non-pregnant persons** (screen persons at increased risk for syphilis infection) ***pregnant women** (screen all for syphilis infection)	80055, 86592, 86780 or 80081	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z72.51, Z72.52, Z72.53, Z11.3 O09.A0, O09.A1, O09.A2, O09.A3	**NOTE: Z33.1 is not an acceptable principle diagnosis code.**

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Statin Use for the Primary Prevention of Cardiovascular Disease in Adults (Initiate use of low- to moderate-dose statins in adults aged 40 to 75 years without a history of CVD who have 1 or more CVD risk factors (dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk of 10% or greater)	Not applicable, administered through Pharmacy	Not applicable, administered through Pharmacy	Medications covered at 100%: Lovastatin (20 or 40 mg) or Pravastatin (10, 20 40 or 80 mg)
Counseling for tobacco use (Ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration–approved pharmacotherapy for cessation to adults who use tobacco AND ask all pregnant women about tobacco use and provide augmented, pregnancy-tailored counseling for those who smoke)	99385-99387 , 99395-99397 or 99406-99407,	Z87.891, Z72.0, Z71.6, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, F17.200, F17.201, F17.210, F17.211, F17.220, F17.221, F17.290, F17.291, O99.330, O99.331, O99.332, O99.333, O99.334, O99.335 O09.A0, O09.A1, O09.A2, O09.A3,	FDA-approved tobacco cessation prescription medications and OTC nicotine replacement therapy (NRT) are covered at 100%.. NRT is available only with a prescription. Telephonic counseling is available by calling 844-8NCQUIT. **NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Primary care interventions to prevent tobacco use in children and adolescents (including education or brief counseling to prevent initiation of tobacco use among school-aged children and adolescents)	99383, 99384, 99385, 99393, 99394, 99395, 99401, 99402, 99403, 99404	Z00.121, Z00.129, Z00.110, Z00.111, Z00.00, Z00.01, U07.0	99401-99404 are to be used in the absence of a wellness visit.
Screening for visual acuity in children (vision screening for all children at least once between the ages of 3 and 5 years to detect the presence of amblyopia or its risk factors)	99382, 99392, 99173, 99174,or 99177	Z01.00, Z01.01, Z13.5	
HIV Infection Prevention with Pre-exposure prophylaxis (Persons at high risk of acquiring HIV. Offer preexposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of HIV acquisition, including monitoring required prior to initiation of therapy and during drug therapy).	**Drug therapy:** J0739 Effective 1/2/24 G0012 **Counseling for HIV PrEP:** G0011 (effective 1/2/24) **Prior to initiation of therapy**:87806, 82575, 80069, G0472, G0567 87340, 81003, 77080 or 77081, 81025 **Monitoring every 3 months:**87806, 80055, 86592, 86780 or 80081; 87270, 87320, 87490, 87491 or 87810, 87590, 87591 or 87850 , 81025 **Monitoring every 6 months**: 82565	Z51.81 Effective 10/1/23 Z29.81	Medications covered at 100%: Truvada. For members who are clinically unable to utilize Truvada, Viread may be made available by completing this form. and faxing it to the number on the bottom of this document : Apretude will be covered at 100% under the member's medical plan when billed with the diagnosis code listed.
Screening for Unhealthy Drug Use (Ask questions about unhealthy drug use in adults 18 years or older. Screening should be implemented when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred. (Screening refers to asking questions about unhealthy drug use, not testing biological specimens.)	99383, 99384, 99385, 99393, 99394, 99395	Z00.121, Z00.129, Z00.110, Z00.111, Z00.00, Z00.01	Considered part of wellness office visit.

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Screening for anxiety in children and adolescents (aged 8-18 years)	99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395	Z00.121, Z00.129, Z00.110, Z00.111	Done as part of wellness visit

Bright Futures Recommendations for Children	CPT or HCPCS	ICD-10 Diagnosis	Comments
Sensory Screening - Vision	99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99173, 99174 or 99177	Z00.121,Z00.129, Z00.110, Z00.111, Z13.5, Z01.00, Z01.01	May be part of well-child visits.
Sensory Screening - Hearing (beyond newborn screening)	99382, 99383, 99384, 99385, 99392, 99393, 99394, 99395, 92551, 92558 or 92586	Z00.121, Z00.129, Z00.110, Z00.111, Z01.10, Z01.118	May be part of wellness visits.
Developmental Screening	96110	Z00.121, Z00.129 , Z13.42, Z13.49	96111 is not a screening service and should not be reported for this recommendation.
Autism Screening	96110	Z13.41	96111 is not a screening service and should not be reported for this recommendation.
Developmental Surveillance	99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395	Z00.121, Z00.129, Z00.110, Z00.111	May be part of well-child visits.
Psychosocial/Behavioral Assessment	99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395	Z00.121, Z00.129, Z00.110, Z00.111	Part of well-child visits.
Depression Screening (screening at ages 11-21)	99383 99384, 99385 99393, 99394, 99395, G0444	Z00.121, Z00.129, Z00.110, Z00.111 Z13.31	
Alcohol and Drug Use Assessment	99408 , 99409, G0442, G0443, G0396 or G0397 G2011	Z13.89, F10.10, F10.120, F10.129	These codes are to be used when the service is not part of a wellness visit.
Hematocrit or Hemoglobin	85013, 85014, 85018, 85025, 85027	Z00.121, Z00.129, Z00.110, Z00.111, Z13.0	
Congenital Heart Disease Screening	Not applicable, administered through Facility	Not applicable, administered through Facility	Screening for critical congenital heart disease using pulse oximetry should be performed in newborns after 24 hours of age before discharge from the hospital. This screening would be administered to newborn at the birth facility .
Lead Screening (up to 7 yrs)	83655	Z13.88	
Tuberculin Test	86580	Z11.1	
Dyslipidemia Screening (Cholesterol)	80061, 82465, or 83718	Z13.220	.
STI/HIV Screening	G0432, G0433 or G0435 or G0475	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z11.4 O09.A0, O09.A1, O09.A2, O09.A3	Screen adolescents for HIV at least once between the ages of 15 and 21 making every effort to preserve confidentiality of the adolescent, as per “Human Immunodeficiency Virus (HIV) Infection: Screening”, and after initial screening, youth at increased risk of HIV infection should be retested annually or more frequently, STI screening now references recommendations made in the AAP Red Book. This category was previously titled, "STI Screening". **NOTE**: Z33.1 is not an acceptable principle diagnosis code.

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Bright Futures Recommendations for Children	CPT or HCPCS	ICD-10 Diagnosis	Comments
Oral Health	99381, 99382, 99383, 99384, 99391, 99392, 99393, 99394	Z00.121, Z00.129, Z00.110, Z00.111	May be part of well-child visits.
Anticipatory Guidance	99381, 99382, 99383, 99384, 99391, 99392, 99393, 99394	Z00.121, Z00.129, Z00.110, Z00.111	May be part of well-child visits.
Bilirubin Screening Universal assessment of bilirubin level in infants with gestational age of 35 weeks or greater	82247, 88720	Z00.110	Service is typically performed in the birth facility or as part of a wellness office visit in the event of a home birth.
Postpartum depression screening Performed as part of 1, 2, 4, and 6 month well baby visits	96161	Z00.110, Z00.111, Z00.121, Z00.129, Z13.32	To be billed as part of newborn/infant visit. Not mother's postpartum visit

Women's Preventive Services effective at renewal on or after August 1, 2012, unless otherwise noted	CPT or HCPCS	ICD-10 Diagnosis	Frequency
Well Woman visits (Well-woman preventive care visit annually for adult women to obtain the recommended preventive services that are age and developmentally appropriate, including preconception and antepartum care. This well-woman visit should, where appropriate, include other preventive services listed in this set of guidelines .	**Well Women Visits** 99384, 99385, 99386, 99387 or 99394, 99395, 99396, 99397 **Antepartum visits** 99211-99215, 99201-99205 **Modifier for antepartum visits** TH	Z00.00, Z00.01, Z01.411, Z01.419 **Antepartum visits:** Z34.01, Z34.02, Z34.03, O09.00 O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, O09.40, O09.41, 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, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, Z39.2	Annual, although HHS recognizes that several visits may be needed to obtain all necessary recommended preventive services, depending on a woman's health status, health needs, and other risk factors **In order for Antepartum visits to be covered without cost share, the provider must append the TH modifier on the CPT code**
Screening for gestational diabetes	82950	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.A0, O09.A1, O09.A2, O09.A3	In pregnant women between 24 and 28 weeks of gestation and at the first prenatal visit for pregnant women identified to be at high risk for diabetes. **NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Human papillomavirus (HPV) testing (High-risk human papillomavirus DNA testing in women with normal cytology results.)	87623, 87624 , 87625 or G0476	Z11.51	Screening should begin at 30 years of age and should occur no more frequently than every 3 years.
Counseling for sexually transmitted infections for all sexually active women	Part of preventive visit, 99401-99404 or G0445	Z71.7, Z71.89, Z72.51, Z72.52, Z72.53	Annual. 99401-99404 are to be used in the absence of a wellness visit.

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Counseling and Screening for Human Immune-deficiency Virus	Counseling: part of preventive visit or 99401, 99402, 99403, 99404 Screening: G0432, G0433 or G0435 or G0475	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z71.7, Z11.4 O09.A0, O09.A1, O09.A2, O09.A3	Counseling and screening for human immune-deficiency virus for all sexually active women
Contraceptive method (including-but not limited to, sterilization and IUD), and counseling (Group health plans sponsored by certain religious employers, and group health insurance coverage in connection with such plans, are exempt from the requirement to cover contraceptive services)	Part of preventive visit (99384, 99385, 99386, 99394, 99395, 99396), 99401, 99402, 99403, 99404, S0610, S0612, S0613, **Contraceptives** A4261, A4264, J7300, J7302, J7306, J7307, J1050, J7301, , J7297, J7298 or J7296, 96372, 11976, S4981, S4989, 11981, 11982, 11983, **Sterlization:** 57170, 58300, 58600, 58605, 58611, 58615, 58671, 58670, 00952, 00851, 58301, 74740, , 00840, 58661, 58700 **Fertility App:** A9293 **Pregnancy test** 81025 **Ultrasound** 76830, 76857	Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z33.1, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.291, O09.292, O09.293, O09.299, O09.40, O09.41, O09.42, O09.43, O09.211, O09.212, O09.213, O09.219, O09.30, O09.31, O09.32, O09.33, 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, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, O09.891, O09.892, O09.893, O09.899, O09.70, O09.71, O09.72, O09.73, O09.90, O09.91, O09.92, O09.93, Z30.011, Z30.013, Z30.014,Z30.017, Z30.018, Z30.019, Z30.012, Z30.02, Z30.09, Z30.13, Z30.430, Z30.433, Z30.2, Z30.40, Z30.41, Z30.431, Z30.49, Z30.42, Z30.46, Z30.49, Z30.8, Z30.9, Z30.432 O09.A0, O09.A1, O09.A2, O09.A3 **Diagnosis codes for urine pregnancy test:** Z30.011, Z30.013, Z30.014,Z30.017, Z30.018, Z30.019, Z30.012, Z30.430	Diaphragms, vaginal rings, contraceptive patches, female condoms, sponges, spermicides, and emergency contraception are available at a participating pharmacy with an MD prescription. Anesthesia services for 00952 and 00851 will be provided with no cost sharing to appropriate groups If there is a medical reason a member cannot take a generic contraceptive, the physician should review the clinical criteria and if appropriate, submit fax form. . 99401-99404 are to be used in the absence of a wellness visit. Injectable contraceptives and administration (J1050, 96372) are covered when filed on the same claim and billed with a contraceptive encounter diagnosis. **Effective 4/1/24,** Natural Cycles is currently the only FDA-cleared fertility app. Members must download the Member Claim Form or the State Health Plan Claim Form to submit and include the following: the Natural Cycles receipt. Write the HCPCS code A9293 and diagnosis code **Z30.8** on the receipt. **Reimbursement will be per month-not annual subscription.** **Effective 1/1/2023** A pregnancy test prior to the initiation of a contraceptive will be covered with no cost sharing Ultrasound to confirm IUD or implantable contraceptive placement will be covered with no cost sharing **NOTE: Z33.1 is not an acceptable principle diagnosis code.**
Breastfeeding support, supplies, and counseling (Comprehensive lactation support and counseling, by a trained provider during pregnancy and/or in the postpartum period, and costs for breastfeeding equipment)	99401, 99402, 99403, S9443, E0602, E0603, A4281, A4282, A4283, A4284, A4285, A4286	O30.93, Z34.03, Z34.83, Z34.93, Z39.1	Counseling covered at 100% through in-network providers (i.e., OB/GYNs, midwives, facilities); one breast pump provided per pregnancy through in-network DME providers. Replacement supplies for breast pumps or initial supplies for member owned breast pump will be provided with no cost sharing to appropriate groups **Replacement supplies cannot be provided with the initial breast pump as they are included in the initial purchase of the pump** 99401-99403 are to be used in the absence of a wellness visit.
Screening and counseling for interpersonal and domestic violence The USPSTF recommends that clinicians screen for intimate partner violence (IPV) in women of reproductive age and provide or refer women who screen positive to ongoing support services.	Part of preventive visit or 99401, 99402, 99403, 99404	Z00.00, Z00.01, Z01.411, Z01.419	Annual 99401-99404 are to be used in the absence of a wellness visit.

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Screening for Urinary Incontinence (Screening should assess whether women experience urinary incontinence and whether it impacts their activities and quality of life. Clinicians should facilitate referrals women for further evaluation and treatment if indicated)	Part of preventive visit or 99401, 99402, 99403, 99404	Z00.00, Z00.01, Z01.411, Z01.419	Annual 99401-99404 are to be used in the absence of a wellness visit.
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.	Part of preventive visit or 99401, 99402, 99403, 99404, G0447 or G0473	Z71.3	Annual 99401-99404 are to be used in the absence of a wellness visit.

Vaccines Recommended by the Centers for Disease Control (CDC)	ICD-10 Diagnosis	Comments
Diphtheria, Tetanus, Pertussis **Measles, Mumps, Rubella** **Haemophilus Infuenzae Type B** **Hepatitis A** **Hepatitis B** **Influenza** **Pneumococcal** **Meningococcal** **Human Papillomavirus (HPV)*.** **Inactivated Poliovirus** **Rotavirus** **Varicella** **Tetanus-Diphtheria /Tetanus-Diphtheria Acellular Pertussis** **Herpes Zoster (Shingles)** **RSV** **COVID-19** **Adult and Child & Adolescent Immunization Schedules (for persons aged 0-6 years, 7-18 years, and "catch-up schedule")** **Refer to the CDC's posted schedule of immunizations** **http://www.cdc.gov/vaccines/schedules/index.html** ***The HPV vaccine (Gardasil) is covered to age 45 per the Food and Drug Administration (FDA) guidelines**	Z23, Z29.11	Doses, recommended ages and recommended populations vary. All recommended routine immunizations will be allowed with no cost share. **Z29.11 should only be used with CPT codes 90380, 90381**

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Revision History January 1, 2017 to July 1, 2026

Date of change	Mandate	Change
January 1, 2017	Screening for Abdominal Aortic Aneurysm	Addition of 76706 effective 1/1/17
	Hypertension in Adults-screening and home monitoring	Added coverage of home monitoring (ABPM). Add DX R03.0, CPT 93784,93786, 93788, 93790 and HCPCS A4670 for ABPM with criteria
	Screening for Breast Cancer	Added 77067 effective 1/1/18. Removed 77052, 77057 termed 12/31/16
	Colorectal Cancer Screening	Added new HCPCS code G0500 with following instructions: Moderate sedation (G0500) performed by the physician performing the procedure is allowed but cannot be billed on the same DOS as 00810
June 1, 2017	Screening for Breast Cancer	Addition of coverage for 3-D tomosynthesis and CPT code 77063
July 1, 2017	Breast Feeding Support, Supplies and Counseling	Added statement clarifying that replacement supplies cannot be provided at same time as initial breast pump as they are included in purchase of pump
October 1, 2017		Remove ICD-9 codes from all mandates
	Screening for latent tuberculosis	**New mandate effective 10/1/17**
	Counseling related to BRCA screening	Addition of diagnosis code Z71.83 effective 10/1/17. Removed Z31.5 as no longer applicable
	Screening for chlamydial infection in non-pregnant and pregnant women	Removed 87800 and 87801 as more specific codes should be used to report service
	Screening for gonorrhea for women	Removed 87800 and 87801 as more specific codes should be used to report service
	Vaccines	Added Shingrix to covered vaccines
December 1,2017	**Statin Use for the Primary Prevention of Cardiovascular Disease in Adults**	**New mandate effective 12/1/17**
January 1, 2018	**Bilirubin Screening**	**New mandate effective 1/1/18 or upon group renewal**
	Postpartum depression screening	**New mandate effective 1/1/18 or upon group renewal**
	Colorectal cancer screening	Added 00812 effective 1/1/18. Removed 00810 termed 12/31/17
	Contraceptives	Added J7296 effective 1/1/18. Removed Q9984 termed 12/31/17
	Screening for Breast Cancer	Removed G0202 termed 1231/17
	Screening for Cervical Cancer	Removed 88154 termed 12/31/17
April 1, 2018	Developmental screening	Added dx codes Z00.129 and Z00.120 to covered diagnosis codes effective 4/1/18
May 1, 2018	**Screening for preeclampsia**	**New mandate effective 5/1/18 or upon group renewal**
October 1, 2018	Postpartum depression screening	Added dx code Z13.32 effective 10/1/18
	Depression screening (adult and Bright Futures)	Added dx code Z13.31 effective 10/1/18. Removed Z13.89 effective 9/30/18 (should no longer be used as more specific code available)
	Autism screening	Added dx code Z13.41 effective 10/1/18. Removed Z13.89 effective 9/30/18 (should no longer be used as more specific code available)
January 1, 2019	Screening for Diabetes after Pregnancy	Added new mandated coverage for screening in women with previous diagnosis of gestational diabetes effective 1/1/19 or upon group renewal
	Screening and counseling to reduce alcohol misuse	Added HCPCS code G2011 effective 1/1/19
	Counseling related to BRCA screening	Added CPT codes 81163, 81164, 81165, 81166, 81167 effective 1/1/19. Removed CPT codes 81211, 81213, 81214 effective 12/31/18.
	Screening for Urinary Incontinence	**New mandate effective 1/1/19 or upon group renewal**
Date of change	**Mandate**	**Change**
March 1, 2019	Contraceptives	Added Z30.017 and Z30.46
April 1, 2019	Fall Prevention	Revised description based on updated USPSTF recommendation
	Behavioral Counseling to Prevent Skin Cancer	Revised description based on updated USPSTF recommendation
July 1 2019	Screening for Osteoporosis	Revised description based on updated USPSTF recommendation
August 1, 2019	Colorectal Cancer Screening	Added 81528 (Cologuard) to covered tests.
September 1, 2019	Cervical Cancer Screening	Revised description based on updated USPSTF recommendation
October 1, 2019	Counseling for Tobacco Use	Removed 90-day limit on prescription and OTC medications
	Screening for and Management of Obesity in Adults	Revised description based on updated USPSTF recommendation
November 1, 2019	Screening and counseling to reduce unhealthy alcohol use	Revised description based on updated USPSTF recommendation
	Screening and counseling for interpersonal and domestic violence	Revised description based on updated USPSTF recommendation
July 1, 2020	Primary care interventions to prevent tobacco use in children and adolescents	Added U07.0 to list of diagnoses
	HIV Infection Prevention with Pre-exposure prophylaxis	**New mandate effective 7/1/2020 or upon group renewal**
September 1, 2020	Counseling related to BRCA screening	Revised description based on updated USPSTF recommendation
	Screening for hepatitis C virus (HCV) infection	Revised description based on updated USPSTF recommendation
January 1, 2021	**Anxiety Screening**	**New mandate effective 1/1/2021 or upon group renewal**
	Screening for Lung Cancer	Removed G0297 termed 12/31/2020 Added 71271 effective 1/1/2021
May 11,2021	Screening for Lung Cancer	Updated the criteria to reflect new recommendation of ages 50-80 and 20 pack year
July 1, 2021	**Screening for Unhealthy Drug Use**	**New mandate effective 7/1/2021 or upon group renewal**
January 1, 2022	Contraceptives	Removed codes for Essure (58565,5834) oas it is no longer available commercially
March 7, 2022	Colorectal Cancer Screening	Updated criteria to reflect new recommendation of ages 45-75. Change effective for eligible members no later than 4/1/2022
Jun1 1, 2022	Colorectal Cancer Screening	Addition of coding instructions for colonoscopy after a positive stool based (FIT, Cologuard) or direct visualization test (sigmoidoscopy or CT colonography) to be covered under preventive benefit
	Healthy Weight and Weight Gain In Pregnancy: Behavioral Counseling	**New mandate effective 6/1/2022 or upon group renewal**

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	Interventions	
July 1, 2022	Contraceptives	Addition of salpingectomy and associated anesthesia as surgical method of sterilization covered under preventive benefit
August 1, 2022	Contraceptives	Addition of app-based fertility tools as method of contraception covered under preventive benefit and coding instructions
September 1, 2022	Screening for diabetes	Change in age range from 40-70 to 35-70 and addition of recommendation to refer patients with abnormal blood glucose levels to intensive behavioral counseling interventions to promote a healthful diet and physical activity
January 1, 2023	Contraceptives	Addition of coverage of pregnancy test prior to initiation of contraceptive and ultrasound for use in implant/IUD removal. Added coverage of ancillary services when sterilization procedure performed as outpatient
	Colorectal Cancer Screening	Addition of 45390 as a covered colonoscopy procedure
January 15, 2023	HIV Infection Prevention with Pre-exposure prophylaxis	Addition of J0739 as covered under medical benefit
May 1, 20223	Aspirin to prevent CVD	Removed mandate. USPTF recommendation revised to C/D
October 1, 2023	HIV Infection Prevention with Pre-exposure prophylaxis	Addition of Z29.81 as a covered diagnosis
	Vaccines	Added Covid-19 vaccines and RSV vaccines(all ages) to list of covered vaccines
	STI/HIV Screening (Bright Futures)	Clarified frequency of screening
	Screening for anxiety in children and adolescents	**New Mandate effective 11/1/23**
January 1, 2024	HIV Infection Prevention with Pre-exposure prophylaxis	Addition of G0011, G0012 as covered codes
	Vaccines	Addition dx code Z29.11 to be used with RSV monoclonal antibody vaccines
April 1, 2024	Contraceptives	Addition of A9293 and revision of submission instructions for Natural Cycles fertility app including switching from annual to monthly reimbursement
July , 2024	Screening for gonorrhea for women	Addition of 87801 effective 8/15/24
	Screening for chlamydial infection in non-pregnant and pregnant women	Addition of 87801 effective 8/15/24
January 1, 2025	Counseling related to BRCA screening	Removal of 96040 and addition of 96041 effective 1/1/2025
February 1, 2025	Screening for Urinary Incontinence	Revised description based on updated USPSTF recommendation
April 1, 2025	Screening for hepatitis C virus (HCV) infection	Addition of G0567 as covered code
	HIV Infection Prevention with Pre-exposure prophylaxis	Addition of G0567 as covered code
July 1, 2027	Screening for breast cancer	Additional imaging and pathology to complete screening added based on updated WPSI recommendation. Change retro to Jan 1, 2026 or upon renewal for ASO groups
	Well Woman visits	Addition of coding for Antepartum visits based on elimination of global maternity billing This will be effective Sept 1, 2026