PREVENTIVE CARE GUIDE

BlueCross BlueShield of Vermont

An Independent Licensee of the Blue Cross and Blue Shield Association.

PURPOSE OF THIS GUIDE

We created this guide to help you understand your plan's zero-cost preventive care benefit. This guide explains:

- Preventive care available at no cost to you; and
- Billing information your provider may need to report your preventive care.

Some of the language found within this guide is technical. We hope that by providing you with the types of care covered by your preventive benefit, you will be able to get the most from your plan. We also hope this will be a useful tool for your providers.

RECOMMENDATIONS FOR PREVENTIVE CARE BENEFITS

The Affordable Care Act and Vermont state mandates define your plan's zero-cost preventive benefit. Your preventive services are eligible at no cost to you when they align with the recommendations of four expert medical and scientific bodies:

- The United States Preventive Services Task Force (USPSTF) list of A- or B-rated services;
- The Advisory *Committee* on Immunization Practices (ACIP);
- The Health Resources and Services Administration's (HRSA) infant, children and adolescent preventive services guidelines; and
- The Health Resources and Services Administration's (HRSA) women's preventive services guidelines.

The experts listed above provide guidance and research to determine the most effective care for national population health. This means that your plan covers services that most of the public needs at no cost to you. We also include Vermont state mandates, as required.

Some services require prior approval. You may review our prior approval requirements online at https://www.bluecrossvt.org/providers/prior-approval-authorization.

FOR MEMBERS

When the care you receive care falls outside of the zero-cost preventive definition listed above and the services and codes outlined in this document, you may pay cost-share (such as deductible, co-insurance, or co-payments) like you would for any other service.

FOR PROVIDERS

ICD-10-CM Codes in **bold** denote codes that, according to proper coding convention within the International Classification of Diseases, may only be reported as the principal/first-listed diagnosis. Please see your ICD-10-CM manual for clarification and additional instructions. Procedure codes listed may come from Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS). Diagnosis codes indicated are from the 10th edition of the International Classification of Diseases (ICD-10-CM).

Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System

(HCPCS) codes in **bold** are combination vaccines containing at least two toxoids. All vaccines listed are eligible with no diagnosis code requirements.

Claim editing logic applies and supersedes all coding provided in this document.

HAVE QUESTIONS?

Call our customer service team at the number on the back of your ID card. We are here to help!

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CHILDREN AND ADOLESCENTS FROM BIRTH TO AGE 17
General Screenings and Tests

Administrative Note: If a preventive lab requires a blood draw for specimen collection, the blood draw (CPT® code 36415 or 36416) is also eligible at no cost to the member.

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Alcohol Misuse Screening and Behavioral Counseling Interventions Procedure Codes: 96160, 99408, 99409, G0442, G0443, G2011 Diagnosis Codes any eligible diagnosis						In a primary care setting	
Anemia Screening Procedure Codes: 85013, 85014, 85018, 85025, 85027 Diagnosis Codes: **Z00.121, Z00.129**							
Behavioral Assessment This service is included in the coding for a preventive medicine exam.							
Blood Pressure Screening This service is included in the coding for a preventive medicine exam.							

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Cervical Cancer Screening and Human Papillomavirus (HPV) Testing Procedure Codes: 87623, 87624, 87625, 87626, 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88155, 88164, 88165, 88166, 88167, 88174, 88175, G0101, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, G0476*, P3000, P3001, Q0091 Diagnosis Codes: **Z01.411, Z01.419, Z01.42**, Z11.51, Z12.4, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9 *also eligible with Z11.3 and Z12.72							
Chlamydia Screening Procedure Codes: 86631, 86632, 87110, 87270, 87490, 87491, 87800 Diagnosis Codes: **Z00.121, Z00.129, Z01.411, Z01.419, Z01.42**, Z11.3, Z11.4, Z11.8, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53							
Congenital Hypothyroidism Procedure Codes: 84436, 84437, 84439, 84443 Diagnosis Codes: **Z00.110, Z00.111**, **Z00.121, Z00.129**, Z13.29	Newborns						

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

<table>
<tr><th></th><th>Birth</th><th>12 Months</th><th>18 Months</th><th>2 to 4 Years</th><th>5 to 10 Years</th><th>11 to 14 Years</th><th>15 to 17 Years</th></tr>
<tr><td>Depression Screening
Procedure Codes: G0444, 96127, 96161, 99403, 99404
Diagnosis Codes: any eligible diagnosis
This service is also included in the coding for a preventive medicine exam.</td><td></td><td></td><td></td><td></td><td></td><td colspan="2">In a primary care setting</td></tr>
<tr><td>Developmental Screening
Procedure Codes: 96110[1], G0451
Diagnosis Codes: any eligible diagnosis</td><td></td><td colspan="3">Ages 9 months, 18 months, and 30 months</td><td colspan="3"></td></tr>
<tr><td>Dyslipidemia Screening for Cholesterol
Procedure Codes: 80061, 82465, 83718
Diagnosis Codes: Z00.121, Z00.129, Z13.220</td><td colspan="2"></td><td></td><td>Ages 2 years and 4 years</td><td></td><td colspan="2">Follow Up</td></tr>
<tr><td>Fluoride Varnish Application
Procedure Codes: 99188
Diagnosis Codes: any eligible diagnosis</td><td colspan="4">Every 3 to 6 months for children from primary tooth eruption to age 6</td><td></td><td></td><td></td></tr>
<tr><td>Gonorrhea Screening
Procedure Codes: 87590, 87591, 87850
Diagnosis Codes: Z00.121, Z00.129, Z01.411, Z01.419, Z01.42, Z11.3, Z11.4, Z11.8, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53</td><td></td><td></td><td></td><td></td><td></td><td colspan="2"></td></tr>
</table>

[1] Prior approval may be required.

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Healthy Diet and Exercise Counseling for Obesity Procedure Codes: 97802^, 97803^, 97804^, 99401*, 99402*, 99403*, 99404*, G0446^, G0447^, S9452^, S9470^ Diagnosis Codes: Z00.121, Z00.129 *also eligible with Z01.411, Z01.419, and Z13.6 ^ also eligible with Z71.3				Ages 3 years to 17			
Hearing Screening Procedure Codes: 92551, 92552, 92587, 92650, 92651, 92652, V5008 Diagnosis Codes: Z00.110, Z00.111, **Z00.121, Z00.129**, Z01.10, Z01.118	Recommended at ages: Newborn; between 3-5 days to 2 months; 4 years; 5 years, 6 years; 8 years; 10 years; once between age 11-14 years; once between age 15-17 years; also recommended for those that have a positive risk assessment.						
Hepatitis B Screening Procedure Codes: 86704, 86706, 87340*, G0499 Diagnosis Codes: **Z00.121, Z00.129, Z01.411, Z01.419, Z01.42,** Z11.3, Z11.4**,** Z11.59, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53 *also eligible with Z21							
Height, Weight and Body Mass Index (BMI) Review This service is included in the coding for a preventive medicine exam.							

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Human Immunodeficiency Virus (HIV) Screening Procedure Codes: 86689*, 86701*, 86702*, 86703*, 87806 87389, 87390, 87534, 87535, 87536, G0432*, G0433*, G0435*, G0475* Diagnosis Codes, Z11.3, Z11.4, Z11.59, Z20.2, Z20.6, Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53 *also eligible with **Z00.121, Z00.129 and Z71.7**							
Prevention of Human Immunodeficiency Virus (HIV) Infection; Preexposure Prophylaxis (PrEP) **Behavioral Counseling for PrEP to Prevent HIV** Procedure Codes: G0011, G0013 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Lipid Screening Yearly for PrEP (DESCOVY)** Procedure Codes: 80061, 82465, 83718 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Kidney Function Testing** Procedure Codes: 82565, 82575, 82610 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53							

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Office Visits Procedure Codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Pregnancy Testing** Procedure Code: 81025 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 (also see codes in Sexually Transmitted Infection Counseling Section) (also see codes in the Preventive Medicine Exam section) (also see codes in the Antiretroviral Therapy section) (also see codes in the Chlamydia Screening Section) (also see codes in the Gonorrhea Screening section) (also see codes in the Hepatitis B Virus Infection Screening Section) (also see codes in the HIV (Human Immunodeficiency Virus) Screening Section) (also see codes in the Syphilis Screening Section)							

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

<table>
<tr><th></th><th>Birth</th><th>12 Months</th><th>18 Months</th><th>2 to 4 Years</th><th>5 to 10 Years</th><th>11 to 14 Years</th><th>15 to 17 Years</th></tr>
<tr><td>Lead Screening
Procedure Code: 83655
Diagnosis Codes: any eligible diagnosis</td><td colspan="4">Up to age 6</td><td></td><td></td><td></td></tr>
<tr><td>MonkeyPox (mpox) Screening
Procedure Code: 87593
Diagnosis Codes: any eligible diagnosis</td><td colspan="4"></td><td></td><td></td><td></td></tr>
<tr><td>Oral Health Risk
This service is included in the coding for a preventive medicine exam.</td><td colspan="5"></td><td></td><td></td></tr>
<tr><td>Phenylketonuria (PKU) Screening
Procedure Codes: 84030
Diagnosis Codes: Z00.121, Z00.129, Z13.228</td><td>Newborns</td><td></td><td></td><td></td><td></td><td></td><td></td></tr>
<tr><td>Sexually Transmitted Infection Counseling
Procedure Codes: 99401, 99402, 99403, 99404, G0445
Diagnosis Codes: Z00.121, Z00.129, Z01.411, Z01.419, Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53</td><td></td><td></td><td></td><td></td><td></td><td colspan="2"></td></tr>
<tr><td>Sexually Transmitted Infection Screening
Procedure Codes: 87081, 87084, 87800*
Diagnosis Codes: Z01.411, Z01.419, Z01.42, Z12.4, Z12.72
*also eligible with Z00.121, Z00.129, and Z11.8</td><td></td><td></td><td></td><td></td><td></td><td colspan="2"></td></tr>
</table>

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Sickle-Cell Disease Screening Procedure Codes: 83020, 83021 Diagnosis Codes: Z13.0	Infants up to 1 year of age						
Syphilis Screening Procedure Codes: 0064U, 0065U, 0210U, 86592, 86780 Diagnosis Codes: **Z00.121, Z00.129**, Z11.3, Z11.4, Z20.2, Z20.6, Z29.81,Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9 Z72.51, Z72.52, Z72.53							
Tobacco Use Counseling Procedure Codes: 99406, 99407 Diagnosis Codes: any eligible diagnosis							
Tuberculosis Screening Procedure Codes: 86480, 86481, 86580 Diagnosis Codes: Z00.121, Z00.129, Z11.1, Z11.7, Z20.1	Risk assessment recommended at ages one month; 6 months and then annually beginning at 1 year through age 17 with screening to follow if there is a positive risk assessment.						
Vision Screening Procedure Codes: 99173, 99174, 99177 Diagnosis Codes: Z00.110, Z00.111, Z00.121, Z00.129, Z01.00, Z01.01	Subject to one (1) screening limitation per year						

Children and Adolescents from Birth to Age 17 – General Screenings and Tests

	Birth	12 Months	18 Months	2 to 4 Years	5 to 10 Years	11 to 14 Years	15 to 17 Years
Preventive Gynecologic and Wellness Exam for Contraceptive Management Procedure Codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99459 Diagnosis Codes: Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9							
Preventive Medicine Exam Procedure Codes: 99381, 99382, 99383, 99384, 99391, 99392, 99393, 99394, 99459 Diagnosis Codes: eligible with any diagnosis Contraceptive counseling is included in the coding for a preventive medicine exam.	Recommended annually						

CHILDREN AND ADOLESCENTS FROM BIRTH TO AGE 17
Vaccines and Immunizations

Administrative Note: This vaccine schedule represents the CDC's Advisory Committee on Immunization Practices' recommended vaccines for all children. Procedure codes listed may come from Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS).

	Birth	1m	2m	4m	6m	9m	1yr	15m	18m	19-23m	2-3yrs	4-6yrs	7-10yrs	11-12yrs	13-15yrs	16-17yrs
Hepatitis B (HepB) Procedure Codes: **90697 (DTaPIPV-Hib-HepB),** 90740, 90743, 90744, 90747, **90748 (Hib-HepB)**																
Rotavirus RV1 (2-dose) or RV5 (3-dose)[2] Procedure Codes: 90680, 90681																
Diphtheria, tetanus, and acellular pertussis (DTaP) Procedure Codes: **90696 (DTap-IPV), 90697 (DTaPIPV-Hib-HepB), 90698 (DTap-IPV/Hib),** 90700, 90702																
Tetanus, diphtheria, and acellular pertussis (TDaP) Procedure Codes: 90714 (TD only), 90715																

[2] Whether or not a third dose of rotavirus vaccine is needed depends on which version of the vaccine was administered.

Children and Adolescents from Birth to Age 17 – Vaccines and Immunizations

	Birth	1m	2m	4m	6m	9m	1yr	15m	18m	19-23m	2-3yrs	4-6yrs	7-10yrs	11-12yrs	13-15yrs	16-17yrs
Haemophilus influenza type B (Hib) Procedure Codes: **90644 (Hib-MenCY)**, 90647, 90648, **90697 (DTaPIPV-Hib-HepB), 90698 (DTap-IPV/Hib), 90723 (DTap-HepB-IPV), 90748 (HepB-Hib)**																
Pneumococcal conjugate Procedure Codes: 90670,90671																
Inactivated poliovirus (IPV) Procedure Codes: **90696 (DTap-IPV), 90697 (DTaPIPV-Hib-HepB), 90698 (DTap-IPV/Hib),** 90713, **90723 (DTap-HepB-IPV)**																
Influenza (IIV; LAIV) Procedure Codes: 90655, 90656, 90657, 90658, 90660, 90661, 90662, 90663, 90664, 90666, 90667, 90668, 90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90689, 90694, 90756, Q2035, Q2036, Q2037, Q2038, Q2039					Annually											

Children and Adolescents from Birth to Age 17 – Vaccines and Immunizations

	Birth	1m	2m	4m	6m	9m	1yr	15m	18m	19-23m	2-3yrs	4-6yrs	7-10yrs	11-12yrs	13-15yrs	16-17yrs
COVID-19 Vaccines Procedure Codes: 91304, 91318, 91319, 91320, 91321, 91322 COVID-19 Vaccine Administration Procedure Codes: 90480	Per manufacturer age-appropriate recommendations															
Measles, mumps, and rubella (MMR) Procedure Codes: 90707, **90710 (MMRV)**																
Varicella (VAR) Procedure Codes: **90710 (MMRV),** 90716																
Hepatitis A (HepA) Procedure Codes: 90633, 90634																
Human Papillomavirus (HPV) Procedure Codes: 90649, 90650, 90651																
Meningococcal Procedure Codes: 90619, 90620, 90621, 90623 (Pentavalent vaccine, conjugated), 90644 (Hib-MenCY), 90733, 90734																

Children and Adolescents from Birth to Age 17 – Vaccines and Immunizations

	Birth	1m	2m	4m	6m	9m	1yr	15m	18m	19-23m	2-3yrs	4-6yrs	7-10yrs	11-12yrs	13-15yrs	16-17yrs
Respiratory Syncytial Virus (RSV) Procedure Codes: 90380, 90381, 90683	Per manufacturer age-appropriate recommendations as recommended by your provider															
Vaccine Administration Procedure Codes: 90460, 90461, 90471, 90472, 90473, 90474, 96380, 96381, G0008, G0009, G0010	Vaccine administration codes must be indicated as appropriate															

CHILDREN AND ADOLESCENTS FROM BIRTH TO AGE 17
Medications and Supplements

Category	Products	Recommendation
Fluoride Supplementation	• Fluoride Chewable Tablets, 0.25 MG • Fluoride Chewable Tablets, 0.5 MG • Fluoride Drops, 0.125 MG • Fluoride Drops, 0.25 MG • Fluoride Drops, 0.5 MG • Multivitamin w/ Fluoride, Chewable, 0.25 MG • Multivitamin w/ Fluoride, Chewable, 0.5 MG • Multivitamin w/ Fluoride, Drops, 0.25 MG, Suspension • Multivitamin w/ Fluoride, Drops, 0.5 MG, Suspension	For children starting at 6 months up to 5 years of age without fluoride in their water sources. Generic only with prescription.
Contraceptives	• Barrier methods, like diaphragms and sponges • Hormonal methods, like oral contraceptives and vaginal rings • Implanted devices, like intrauterine devices (IUDs) • Emergency contraception, like Plan B® and Ella®	Available as prescribed to prevent pregnancy for all persons with reproductive capacity. Oral contraceptives are available as generic-only versions with prescription. Certain contraceptive methods are also available in an office or outpatient setting. Please see the Pre-Natal Care and Family Planning section of this brochure for additional information on contraception methods.
Antiretroviral Therapy for Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PrEP) Antiretroviral Therapy Codes: J0738, J0739, J0750, J0751, J0752, J0799 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Antiretroviral Therapy Administration Codes: G0012, Q0516, Q0517, Q0518, Q0521 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	• APRETUDE (J0739) • DESCOVY® (J0751) • SUNLENCA® (J0738, J0752) • Truvada® (J0750)	For all persons who are at high risk of HIV acquisition and who are not undergoing HIV treatment. Once generic becomes available, zero-cost coverage will only apply to the generic form.

ADULTS AGE 18 AND OLDER
General Screenings and Tests

Administrative Note: If a preventive lab requires a blood draw for specimen collection, the blood draw (CPT® code 36415 or 36416) is also eligible at no cost to the member.

<table>
<tr><th></th><th>18</th><th>20</th><th>30</th><th>35</th><th>40</th><th>45</th><th>50</th><th>55</th><th>60</th><th>65</th><th>70</th><th>75</th></tr>
<tr><td>Abdominal Aortic Aneurysm Screening
Procedure Codes: 76706
Diagnosis Codes: any eligible diagnosis</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td colspan="3">One-time screening for those who have smoked</td></tr>
<tr><td>Alcohol Misuse Screening and Behavioral Counseling Interventions
Procedure Codes: 96160, 99408, 99409, G0442, G0443, G2011
Diagnosis Codes: any eligible diagnosis</td><td colspan="11">In a primary care setting</td></tr>
<tr><td>Blood Pressure Screening
This service is included in the coding for a preventive medicine exam.</td><td colspan="11"></td></tr>
<tr><td>BRCA Risk Assessment and Genetic Counseling/Testing[3]
Procedure Codes: 81162, 81163, 81164, 81165, 81166, 81167, 81212, 81215, 81216, 81217, <s>96040</s>, 96041
Diagnosis Codes: Z31.5, Z80.3, Z80.41</td><td></td><td colspan="6">In a primary-care setting</td><td></td><td></td><td></td><td></td></tr>
</table>

[3] Prior approval may be required

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Cervical Cancer Screening and Human Papillomavirus (HPV) Testing Procedure Codes: 87623, 87624, 87625, 87626, 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88155, 88164, 88165, 88166, 88167, 88174, 88175, G0101, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, G0476*, P3000, P3001, Q0091 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z11.51, Z12.4, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9 *also eligible with Z11.3 and Z12.72												
Chlamydia Screening Procedure Codes: 86631, 86632, 87110, 87270, 87490, 87491, 87800 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z11.3, Z11.4, Z11.8, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81,Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53	Up to age 24 and older persons at higher risk											

Adults Age 18 and Older – General Screenings and Tests

<table>
<tr><th></th><th>18</th><th>20</th><th>30</th><th>35</th><th>40</th><th>45</th><th>50</th><th>55</th><th>60</th><th>65</th><th>70</th><th>75</th></tr>
<tr><td>Colorectal Cancer Screening[4]

Procedure Codes: 0464U,44401, 45330, 45331, 45333, 45334, 45338, 45346, 45378, 45380, 45381, 45382, 45384, 45385, 45388, 74263, 81528, 82270, 82274, 88305, 99152, 99153, 99156, 99157, G0104, G0105, G0121, G0328, G0500, S0285

Diagnosis Codes: D12.0, D12.2, D12.3, D12.4, D12.5, D12.6, D12.7, D12.8, D12.9, D50.9, K63.5, Z00.00, Z00.01, Z12.10, Z12.11, Z12.12, Z12.13, Z13.811, Z80.0, Z80.9, Z83.71, Z85.030, Z85.038, Z85.040, Z85.048, Z85.060, Z85.068, Z86.0100, Z86.0101, Z86.0102, Z86.0109, Z86.018, Z87.19</td><td colspan="11">Frequency of screening will vary depending on the screening method; for screening of younger persons at higher risk, screening encounters should have a screening diagnosis in the primary position and a disease-specific condition in the secondary position.</td></tr>
<tr><td>Depression Screening

Procedure Codes: G0444, 96127, 96161 99403, 99404

Diagnosis Codes: any eligible diagnosis

This service is also included in the coding for a preventive medicine exam.</td><td colspan="11">Periodic screenings for all adults in a primary care setting</td></tr>
<tr><td>Diabetes Screening

Procedure Codes: 82947, 82950, 82951 83036

Diagnosis Codes: Z00.00, Z00.01, Z13.1</td><td></td><td></td><td></td><td></td><td colspan="7">Recommended for adults age 40 to 70 who are overweight or obese as part of a cardiovascular risk assessment in a primary care setting</td><td></td></tr>
</table>

[4] Prior approval is required for monitored anesthesia care administered for a screening colonoscopy (CPT® 00812). Please see the prior approval list for additional requirements.

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Dual-Energy X-Ray Absorptiometry Scan for Bone Density Procedure Codes: 77080 Diagnosis Codes: **Z00.00, Z00.01**, Z13.820										For women age 65 or older (or younger women with fracture risk as determined by a formal Clinical Risk Assessment Tool)		
Dual-Energy X-Ray Absorptiometry Scan for Bone Density (Women with Risk Factor ages 35 +) Procedure Codes: 77080 **Diagnosis Codes:** Z82.62												
Falls Prevention This service is included in the coding for a preventive medicine exam.												
Gonorrhea Screening Procedure Codes: 87590, 87591, 87850 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z11.3, Z11.4, Z11.8, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53	For sexually active persons 24 years or younger and older persons at increased risk											

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Healthy Diet and Exercise Counseling for Obesity Procedure Codes: 97802^, 97803^, 97804^, 99401*, 99402*, 99403*, 99404*, G0446^, G0447^, S9452^, S9470^ Diagnosis Codes: **Z00.00, Z00.01** *also eligible with Z01.411, Z01.419, and Z13.6 ^ also eligible with Z71.3 General obesity screening is included in the coding for a preventive medicine exam.												
Hearing Screening Procedure Codes: 92551, 92552, 92587, V5008 Diagnosis Codes: Z01.10, Z01.118	Once between age 18-21 years and for those that have a positive risk assessment.											

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Hepatitis B Screening Procedure Codes: 86704, 86706, 87340*, G0499 Diagnosis Codes: **Z00.00, Z00.01,** Z01.411, Z01.419, Z01.42, Z11.3, Z11.4, Z11.59, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53 *also eligible with Z21	Recommended in persons at high risk – discuss with your provider											
Hepatitis C Screening Procedure Code: 86803, 87522 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z11.3, Z11.4 Z11.59, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81,Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53	Recommended in persons at high risk, and a one-time screening for all adults born between 1945 and 1965											

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Human Immunodeficiency Virus (HIV) Screening Procedure Codes: 86689, 86701, 86702, 86703, 87389, 87390, 87534, 87535, 87536, 87806, G0432, G0433, G0435, G0475 Diagnosis Codes: **Z00.00, Z00.01**, Z11.3, Z11.4, Z11.59, Z20.2, Z20.6, Z29.81, Z71.7, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, Z72.51, Z72.52, Z72.53											
Human Immunodeficiency Virus (HIV) Screening; Preexposure Prophylaxis (PrEP) **Behavioral Counseling for PrEP to Prevent HIV** Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Procedure Codes: G0011, G0013 **Lipid Screening Yearly for PrEP (DESCOVY)** Procedure Codes: 80061, 82465, 83718 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53												

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Kidney Function Testing Procedure Codes: 82565, 82575, 82610 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Office Visits** Procedure Codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Pregnancy Testing** Procedure Code: 81025 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 (also see codes in Sexually Transmitted Infection Counseling Section) (also see codes in the Preventive Medicine Exam section) (also see codes in the Antiretroviral Therapy section) (also see codes in the Chlamydia Screening Section)												

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
(also see codes in the Gonorrhea Screening section) (also see codes in the Hepatitis B Virus Infection Screening Section) (also see codes in the HIV (Human Immunodeficiency Virus) Screening Section) (also see codes in the Syphilis Screening Section)												
Intimate Partner Violence Screening This service is included in the coding for a preventive medicine exam.												
Lipid Screening Procedure Codes: 80061, 82465, 83718 Diagnosis Codes: **Z00.00, Z00.01**, Z13.220												
Low-Dose CT Screening for Lung Cancer[5] Procedure Codes: 71271 Diagnosis Codes: any eligible diagnosis							Recommended annually for adults age 50 to 80 who currently smoke or have quit smoking within the last 15 years					

[5] Prior approval may be required.

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Mammography Screening for Breast Cancer Procedure Codes: 77061*, 77062*, 77063, 76641*, 76642*, 77065*, 77066*, 77067, G0279* Diagnosis Codes: N63.15, N63.25, R92.2, R92.8, **Z00.00, Z00.01**, Z12.31, Z12.39, Z80.3, Z85.3, Z90.10, Z90.11, Z90.12, Z90.13 *only eligible with R92.2 and R92.8, Z12.39					Screening beginning at age 40 and older, and for younger persons at increased risk							
MonkeyPox (mpox) Screening Procedure Code: 87593 Diagnosis Codes: any eligible diagnosis												
Prostate Screening Procedure Codes: 84066, 84152, 84153, 84154, G0102, G0103 Diagnosis Codes: **Z00.00, Z00.01**, Z12.5					Beginning age 40 to 69 years							
Sexually Transmitted Infection Counseling Procedure Codes: 99401, 99402, 99403, 99404, G0445 Diagnosis Codes: Z00.121, Z00.129, Z01.411, Z01.419, Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53												
Skin Cancer Behavioral Counseling This service is included in the coding for a preventive medicine exam.	Adults up to age 24 who have fair skin											

Adults Age 18 and Older – General Screenings and Tests

	18	20	30	35	40	45	50	55	60	65	70	75
Syphilis Screening Procedure Codes: 0064U, 0065U, 0210U, 86592, 86780 Diagnosis Codes: **Z00.00, Z00.01**, Z11.3, Z11.4, Z20.2, Z20.6,Z29.81, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9 Z72.51, Z72.52, Z72.53	Recommended in persons at high risk – discuss with your provider											
Tobacco Use Counseling Procedure Codes: 99406, 99407 Diagnosis Codes: any eligible diagnosis	Recommended tobacco cessation for all adults who use tobacco products											
Tuberculosis Screening Procedure Codes: 86480, 86481, 86580 Diagnosis Codes: Z00.00, Z00.01, Z11.1, Z11.7												
Vision Screening Procedure Codes: 99173*, 99174*, 99177* Diagnosis Codes: Z00.00, Z00.01, Z01.00, Z01.01 *eligible up to age 21 only (Subject to one (1) screening limitation per year)												

Adults Age 18 and Older – General Screenings and Tests

<table>
<tr><th></th><th>18</th><th>20</th><th>30</th><th>35</th><th>40</th><th>45</th><th>50</th><th>55</th><th>60</th><th>65</th><th>70</th><th>75</th></tr>
<tr><td>Preventive Gynecologic and Wellness Exam
Procedure Codes: G0445, S0610, S0612, S0613
Diagnosis Codes: Z00.00, Z00.01, Z01.411, Z01.419, Z13.89</td><td colspan="11">Recommended annually</td></tr>
<tr><td>Preventive Gynecologic and Wellness Exam for Contraceptive Management
Procedure Codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99459
Diagnosis Codes: Z00.00, Z00.01, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9</td><td colspan="8">For persons of child-bearing age</td><td></td><td></td><td></td><td></td></tr>
<tr><td>Preventive Medicine Exam
Procedure Codes: 99385, 99386, 99387, 99395, 99396, 99397, 99459
Diagnosis Codes: eligible with any diagnosis</td><td colspan="11">Recommended annually</td></tr>
</table>

ADULTS AGE 18 AND OLDER
Vaccines and Immunizations

Administrative Note: This vaccine schedule represents the CDC's Advisory Committee on Immunization Practices' recommended vaccines for all adults. All vaccines listed are eligible with no diagnosis code requirements.

	18 to 21 Years	22 to 26 Years	27 to 49 Years	50 to 59 Years	60 to 64 Years	65+
Influenza Procedure Codes: 90653 (65+ years of age), 90655, 90656, 90657, 90658, 90660, 90661, 90662, 90663, 90664, 90666, 90667, 90668, 90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90689, 90694, 90756, Q2035, Q2036, Q2037, Q2038, Q2039	Annually					
COVID-19 Vaccines Procedure Codes: 91304, 91322 COVID-19 Administration Procedure Codes: **90480**	Per manufacturer age-appropriate recommendations					
Tetanus, diphtheria and pertussis (TD/TDaP) Procedure Codes: 90714 (Td only), 90715	Substitute TDaP for TD once, then TD booster every 10 years					
Varicella (VAR) Procedure Codes: **90710 (MMRV),** 90716						
Human papillomavirus (HPV) Procedure Codes: 90649, 90650, 90651						
Herpes Zoster (shingles) Procedure Codes: 90736, 90750						
Measles, mumps, rubella (MMR) Procedure Codes: 90707, **90710 (MMRV)**						
Pneumococcal conjugate Procedure Codes: 90670, 90671, 90677, 90684						

Adults Age 18 and Older – Vaccines and Immunizations

	18 to 21 Years	22 to 26 Years	27 to 49 Years	50 to 59 Years	60 to 64 Years	65+
Pneumococcal polysaccharide Procedure Codes: 90732						
Hepatitis A Procedure Codes: 90632, **90636 (HepA-HepB)**						
Hepatitis B Procedure Codes: **90636 (HepA-HepB),** 90739, 90740, 90746, 90747, **90748, (Hib-HepB), 90759**						
Meningococcal conjugate (MenACWY) Procedure Codes: 90619 90623, 90733						
Meningococcal B Procedure Codes: 90620, 90621						
Haemophilus influenza type B (Hib) Procedure Codes: 90647, 90648, **90748 (Hib-HepB)**						
MonkeyPox (mpox) Procedure Codes: 90611, 90622						
Respiratory Syncytial Virus (RSV) **Procedure Codes: 90678, 90679, 90683**	Per manufacturer age-appropriate recommendations as recommended by your provider					
Vaccine Administration Procedure Codes: 90470, 90471, 90472, 90473, 90474, 96380, 96381, G0008, G0009, G0010	Vaccine administration codes must be indicated as appropriate					

ADULTS AGE 18 AND OLDER
Medications and Supplements

Category	Products	Recommendation
Aspirin prophylaxis	• 81mg varieties (generic only)	For the primary prevention of cardiovascular disease (CVD) and colorectal cancer (CRC), recommended for adults ages 50 to 59 who have a 10 percent or greater 10-year CVD risk, are not at increased risk for bleeding, have a life expectancy of at least 10 years, and who are willing to take low-dose aspirin daily for at least 10 years.
Breast cancer prevention	• Tamoxifen citrate tab, 10 mg and 20 mg (generic only) • Raloxifene HCI tab, 60 mg (generic only)	For those at increased risk for breast cancer
Contraceptives	• Barrier methods, like diaphragms and sponges • Hormonal methods, like oral contraceptives and vaginal rings (generic only) • Implanted devices, like intrauterine devices (IUDs) • Emergency contraception, like Plan B® and Ella® • Female sterilization procedures • Coverage includes member reimbursement for the cost of FDA-approved, cleared, or granted mobile device applications for use as contraception consistent with the FDA-approved, cleared, or granted indication.	Available as prescribed to prevent pregnancy for all persons with reproductive capacity. Oral contraceptives are available as generic-only versions with prescription. Certain contraceptive methods are also available in an office or outpatient setting. Please see the Pre-Natal Care and Family Planning brochure for additional information on contraception methods.
Statins	• 5mg and 10 mg varieties (generics only)	Adults ages 40 to 75 without a history of cardiovascular disease (CVD) who use a low-to-moderate dose statin for the prevention of CVD events and mortality when they have one or more cardiovascular disease risk factors (i.e., dyslipidemia, diabetes, hypertension or smoking) and a calculated 10-year risk of a CVD event of 10 percent or greater
Tobacco cessation	• Nicotine replacement products, such as patches, gum, and lozenges • Bupropion products (generic only up to 180 days)	Adults who use tobacco products
Antiretroviral Therapy for Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PrEP)	• APRETUDE (J0739) • DESCOVY® (J0751) • SUNLENCA® (J0738, J0752) • Truvada® (J0750)	For all persons who are at high risk of HIV acquisition and who are not undergoing HIV treatment.

Category	Products	Recommendation
Antiretroviral Therapy Codes: J0738, J0739, J0750, J0751, J0752, J0799 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Antiretroviral Therapy Administration Codes: G0012, Q0516, Q0517, Q0518, Q0521 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53		Once generic becomes available, zero-cost coverage will only apply to the generic form.

PRE-NATAL CARE AND FAMILY PLANNING FOR PERSONS OF CHILD-BEARING CAPACITY OF ALL AGES

General Screenings and Tests

Administrative Note: If a preventive lab requires a blood draw for specimen collection, the blood draw (CPT code 36415 or 36416) is also eligible at no cost to the member.

The fetal health symbol indicates that additional diagnosis codes for the indicated test or service are in the section for PRE-NATAL AND FAMILY PLANNING FOR PERSONS OF CHILD-BEARING CAPACITY OF ALL AGES – Fetal Health Diagnoses.

<table>
<tr><th></th><th>First Trimester</th><th>Second Trimester</th><th>Third Trimester</th><th>Post-Pregnancy</th><th>Pregnancy Prevention</th></tr>
<tr><td>Alcohol Misuse Screening and Behavioral Counseling Interventions
Procedure Codes: 99408, 99409, G0442, G0443, G2011
Diagnosis Codes: any eligible diagnosis</td><td colspan="4">Recommended screening for all pregnant persons to evaluate alcohol misuse and brief behavioral counseling for risky or hazardous behavior</td><td></td></tr>
<tr><td>Asymptomatic Bacteriuria Screening
Procedure Codes: 87081, 87084, 87086, 87088
Diagnosis Codes: Z00.00, Z00.01, Z01.411, Z01.419, Z01.42, Z12.4, Z12.72
 </td><td></td><td>Recommended at 12-16 weeks gestation or at first prenatal visit, if later</td><td></td><td></td><td></td></tr>
<tr><td>Breast Feeding Support
Procedure Codes: S9443
Diagnosis Codes: Z00.00, Z00.01, P92.6, R62.51, Z39.1</td><td colspan="4">Lactation counseling with a lactation consultant as needed prenatal, or until newborn is thriving.</td><td></td></tr>
<tr><td>Breast Pumps and Related Supplies[6]
Procedure Codes: A4281, A4282, A4283, A4284, A4285, A4286, A4288, E0602, E0603, E0604, [A4287 (100 bags per month or 300 bags per 3 months, with eligible diagnoses codes noted below)]
Diagnosis Codes: O09.A0, O09.A1, O09.A2, O09.A3, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13,O09.211,</td><td></td><td></td><td colspan="2"></td><td></td></tr>
</table>

[6] Prior approval may be required

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
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, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9, P92.6, R62.51, **Z00.00, Z00.01**, **Z39.1**, Z33.1, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93					
Chlamydia Screening Procedure Codes: 86631, 86632, 87110, 87270, 87490, 87491, 87800 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z11.3, Z11.4, Z11.8, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	Screening recommended at first prenatal visit for all pregnant persons aged 24 or younger and for older pregnant persons who are at increased risk				
Contraceptive Methods Procedure Codes: A4261, A4264, A4266, A4267, A4268, A4269, J1050, J7296, J7297, J7298, J7300, J7301, J7304, J7306, J7307, S4981, S4989, S4993, 00851, 00921*^, 11976, 11981, 11982, 11983, 55250*^, 57170, 58120*+, 58300, 58301, 58565, 58600, 58605, 58611, 58615, 58661, 58670, 58671, 74018*+,				Contraceptive methods, including sterilization procedures (such as but not limited to vasectomy, hysterectomy, implantable contraceptive devices, etc.), and patient education and counseling, as prescribed by a health care provider	

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
76830*+, 76857*+, 76998*+, 81025*+, 88302*^96372 Diagnosis Codes: **Z00.00, Z00.01,** Z30.09, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.2, Z30.40, Z30.41, Z30.42, Z30.430, Z30.431, Z30.432, Z30.433, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9, T83.31XA, T83.31XD, T83.31XS, T83.32XA, T83.32XD, T83.32XS, T83.39XA, T83.39XD, T83.39XS *^ Not eligible for zero-cost preventive benefits when the member has a Consumer-Directed Health Plan (CDHP) or for members of some ASO groups; Only eligible with diagnosis codes Z30.09, Z30.2. *+ An eligible diagnosis code from Z30 family must be in the primary diagnosis position.					
Depression Screening Procedure Codes: G0444, 96127, 96161 99403, 99404 any eligible diagnosis	Periodic screenings recommended throughout pregnancy and during the post-partum period, as needed				
Gestational Diabetes Screening Procedure Codes: 82947, 82950, 82951, 83036 Diagnosis Codes: **Z00.00, Z00.01**, Z13.1		Recommended gestational diabetes screening by glucose test for persons 24 – 28 weeks pregnant and at the first prenatal visit for those at high risk			

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
Gonorrhea Screening Procedure Codes: 87590, 87591, 87850 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42,** Z11.3, Z11.4, Z11.8, Z12.4, Z12.72, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 	Screening recommended at first prenatal visit for all pregnant persons aged 24 or younger and for older pregnant persons who are at increased risk				
Healthy Weight and Weight Gain During Pregnancy Procedure Codes: 97802^, 97803^, 97804^, 99401*, 99402*, 99403*, 99404*, G0446^, G0447^, S9452^, S9470^ Diagnosis Codes: Z00.00, Z00.01 *also eligible with Z01.411, Z01.419, and Z13.6 ^ also eligible with Z71.3 					
Hepatitis B Screening Procedure Codes: 86704, 86706, 87340*, G0499 Diagnosis Codes: Z00.00, Z00.01, Z01.411, Z01.419, Z01.42, Z11.3, Z11.4, **Z11.59, Z12.4 and Z12.72,** Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 *also eligible with Z21	Screening recommended at first prenatal visit for all pregnant persons				
Hepatitis C Screening Procedure Codes: 86803, 87522 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z11.3, Z11.4, Z11.59, Z12.4, Z12.72, Z20.2, Z20.6,	Screening recommended at first prenatal visit for all pregnant persons				

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
Z29.81, Z72.51, Z72.52, Z72.53					
Human Immunodeficiency Virus (HIV) Screening Procedure Codes: 86689, 86701, 86702, 86703,87389, 87390, 87534, 87535, 87536, 87806, G0432, G0433, G0435, G0475 Diagnosis Codes: **Z00.00, Z00.01**, Z11.3, Z11.4, Z11.59, Z71.7, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	Screening recommended at first prenatal visit for all pregnant persons				
MonkeyPox (mpox)Screening Procedure Code: 87593 Diagnosis Codes: any eligible diagnosis					
Obstetric Professional Care Procedure Codes: 59400, 59425, 59426, 59510, 59610, 59618 Diagnosis Codes: **Z00.00, Z00.01** In some cases, a co-payment may apply.	Routine professional obstetric care, including antepartum (pre-natal) care, delivery with or without an episiotomy, and post-partum care up to 45 days post-partum. Facility services are not included.				
Obstetric Panels[7] Procedure Codes: 80055, 80081 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z12.4, Z12.72	Screening recommended at first prenatal visit for all pregnant persons				

[7]CPT 80055 and 80081 are bundled panels including an array of tests needed during early pregnancy, such as complete blood count, blood typing, and antibody and antigen tests for various diseases and infections. CPT® 80081 also includes testing for HIV.

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
Obstetric Ultrasound Procedure Codes: 76801, 76802, 76805, 76810, 76811, 76812, 76813, 76814, 76815, 76817 Diagnosis Codes: **Z00.00, Z00.01,** Z33.1	Limited to one ultrasound during pregnancy				
Prevention of Human Immunodeficiency Virus (HIV) Infection; Preexposure Prophylaxis (PrEP) **Behavioral Counseling for PrEP to Prevent HIV** Procedure Codes: G0011, G0013 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Lipid Screening Yearly for PrEP (DESCOVY)** Procedure Codes: 80061, 82465, 83718 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Kidney Function Testing** Procedure Codes: 82565, 82575 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 **Office Visits** Procedure Codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53					

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
Pregnancy Testing Procedure Code: 81025 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 (also see codes in Sexually Transmitted Infection Counseling Section) (also see codes in the Preventive Medicine Exam section) (also see codes in the Antiretroviral Therapy section) (also see codes in the Chlamydia Screening Section) (also see codes in the Gonorrhea Screening section) (also see codes in the Hepatitis B Virus Infection Screening Section) (also see codes in the HIV (Human Immunodeficiency Virus) Screening Section) (also see codes in the Syphilis Screening Section) 					
Rh Incompatibility Screening Procedure Codes: 86901 Diagnosis Codes: **Z00.00, Z00.01, Z01.411, Z01.419, Z01.42**, Z12.4, Z12.72 	Screening recommended at first prenatal visit for all pregnant persons				
Sexually Transmitted Infection Counseling Procedure Codes: 99401, 99402, 99403, 99404, G0445 Diagnosis Codes: Z00.121, Z00.129, Z01.411, Z01.419, Z11.3, Z11.4, Z20.2, Z20.6,					

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
Z29.81, Z72.51, Z72.52, Z72.53					
Syphilis Screening Procedure Codes: 0210U, 0064U, 0065U, 86592, 86780 Diagnosis Codes: **Z00.00, Z00.01**, Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Z72.51, Z72.52, Z72.53 	Screening recommended at first prenatal visit for all pregnant persons				
Tobacco Use Intervention and Cessation Procedure Codes: 99406, 99407 Diagnosis Codes: any eligible diagnosis	Recommended screening for all pregnant persons to evaluate tobacco use and brief behavioral counseling for tobacco cessation				
Preventive Gynecologic and Wellness Exam for Contraceptive Management Procedure Codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99459 Diagnosis Codes: **Z00.001, Z00.01**, Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9				Contraceptive counseling of methods, including sterilization procedures, and patient education and counseling, as prescribed by a health care provider	

PRE-NATAL CARE AND FAMILY PLANNING FOR PERSONS OF CHILD-BEARING CAPACITY OF ALL AGES

Vaccines, Medications, and Supplements

Administrative Note: This vaccine schedule represents the CDC's Advisory Committee on Immunization Practices' recommended vaccines for all pregnant persons. All vaccines listed are eligible with no diagnosis code requirements.

VACCINES

	First Trimester	Second Trimester	Third Trimester	Post-Pregnancy	Pregnancy Prevention
Influenza Procedure Codes: 90655, 90656, 90657, 90658, 90660, 90661, 90662, 90663, 90664, 90666, 90667, 90668, 90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90756, Q2035, Q2036, Q2037, Q2038, Q2039	Recommended at any time during pregnancy, before and during influenza season				
COVID-19 Vaccines Procedure Codes: 91304, 91320, 91321, 91322 COVID-19 Vaccine Administration Procedure Codes: 90480	Per manufacturer age-appropriate recommendations				
Respiratory Syncytial Virus (RSV) Procedure Codes: 90678	Per manufacturer recommendations				
Tetanus, diphtheria and pertussis (TDaP) Procedure Codes: 90715		Recommended for pregnant persons 27 – 36 weeks pregnant for optimal timing, though TDaP may be administered at any time during pregnancy			
Vaccine Administration Procedure Codes: 90460, 90461, 90471, 90472, 90473, 90474, G0008	Vaccine administration codes must be indicated as appropriate				

MEDICATIONS AND SUPPLEMENTS

Category	Products	Recommendation
Aspirin	81mg varieties (generic only)	Use of low-dose aspirin as preventive medication after 12 weeks of gestation for those who are at high risk for preeclampsia.
Antiretroviral Therapy for Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PrEP) Antiretroviral Therapy Codes: J0738, J0739, J0750, J0751, J0752, J0799 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Antiretroviral Therapy Administration Codes: G0012, Q0516, Q0517, Q0518, Q0521 Diagnosis Codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	• APRETUDE (J0739) • DESCOVY® (J0751) • SUNLENCA® (J0738, J0752) • Truvada® (J0750)	For all persons who are at high risk of HIV acquisition and who are not undergoing HIV treatment. Once generic becomes available, zero-cost coverage will only apply to the generic form.
Contraceptives	• Barrier methods, such as diaphragms and sponges • Hormonal methods, such as oral contraceptives and vaginal rings (generic only) • Implanted devices, such as intrauterine devices (IUDs) • Injectables, such as Depo-Provera • Emergency contraception, such as Plan B® and -Ella® • Female sterilization • Coverage includes member reimbursement for the cost of FDA-approved, cleared, or granted mobile device applications for use as contraception consistent with the FDA-approved, cleared, or granted indication.	Available as prescribed to prevent pregnancy. Oral contraceptives are available as generic-only versions with prescription. Certain contraceptive methods are also available in an office or outpatient setting. Please see the Pre-Natal Care and Family Planning brochure for additional information on contraception methods.
Folic Acid supplementation	• 400 mcg or 800 mcg varieties (generic only, over the counter with prescription)	All who are planning or capable of pregnancy

PRE-NATAL AND FAMILY PLANNING FOR PERSONS OF CHILD-BEARING CAPACITY OF ALL AGES
Fetal Health Diagnoses

Administrative Note: This list of diagnosis codes is eligible and valid for all services with the fetal health symbol, as indicated within this document.

ICD-10 Code(s)	Brief Description of Code(s)
O30.001 O30.002 O30.003 O30.009	Twin pregnancy; unspecified number of placenta and unspecified number of amniotic sacs
O30.011 O30.012 O30.013 O30.019	Twin pregnancy; monochorionic/monoamniotic
O30.031 O30.032 O30.033 O30.039	Twin pregnancy; monochorionic/diamniotic
O30.041 O30.042 O30.043 O30.049	Twin pregnancy; dichorionic/diamniotic
O30.091 O30.092 O30.093 O30.099	Twin pregnancy; unable to determine number of placenta and number of amniotic sacs
O30.101 O30.102 O30.103 O30.109	Triplet pregnancy; unspecified number of placenta and unspecified number of amniotic sacs
O30.111 O30.112 O30.113 O30.119	Triplet pregnancy with two or more monochorionic fetuses
O30.121 O30.122 O30.123 O30.129	Triplet pregnancy with two or more monoamniotic fetuses
O30.191 O30.192 O30.193 O30.199	Triplet pregnancy; unable to determine number of placenta and number of amniotic sacs
O30.201 O30.202 O30.203 O30.209	Quadruplet pregnancy; unspecified number of placenta and unspecified number of amniotic sacs
O30.211 O30.212 O30.213 O30.219	Quadruplet pregnancy with two or more monochorionic fetuses

ICD-10 Code(s)	Brief Description of Code(s)
O30.221 O30.222 O30.223 O30.229	Quadruplet pregnancy with two or more monoamniotic fetuses
O30.291 O30.292 O30.293 O30.299	Quadruplet pregnancy; unable to determine number of placenta and number of amniotic sacs
O30.801 O30.802 O30.803 O30.809	Other specified multiple gestation; unspecified number of placenta and unspecified number of amniotic sacs
O30.811 O30.812 O30.813 O30.819	Other specified multiple gestation with two or more monochorionic fetuses
O30.821 O30.822 O30.823 O30.829	Other specified multiple gestation with two or more monoamniotic fetuses
O30.891 O30.892 O30.893 O30.899	Other specified multiple gestation; unable to determine number of placenta and number of amniotic sacs
O09.01 O09.02 O09.03	Supervision of pregnancy with history of infertility
O09.11 O09.12 O09.13	Supervision of pregnancy with history of ectopic or molar pregnancy
O09.212 O09.213 O09.219	Supervision of pregnancy with history of pre-term labor
O09.31 O09.32	Supervision of pregnancy with insufficient antenatal care
O09.40 O09.41 O09.42 O09.43	Supervision of pregnancy with grand multiparity
O09.512 O09.513 O09.519	Supervision of elderly primigravida
O09.521 O09.522 O09.523 O09.529	Supervision of elderly multigravida
O09.612 O09.613 O09.619	Supervision of young primigravida

ICD-10 Code(s)	Brief Description of Code(s)
O09.622 O09.623 O09.629	Supervision of young multigravida
O09.70 O09.71 O09.72 O09.73	Supervision of high-risk pregnancy due to social problems
O09.811 O09.812 O09.813	Supervision of pregnancy resulting from assisted reproductive technology
O09.821 O09.822 O09.823 O09.829	Supervision of pregnancy with history of in utero procedure during previous pregnancy
O09.891 O09.892 O09.893 O09.899	Supervision of other high-risk pregnancy
O09.A0 O09.A1 O09.A2 O09.A3	Supervision of pregnancy with history of molar pregnancy
O36.80X0 O36.80X1 O36.80X2 O36.80X3 O36.80X4 O36.80X5 O36.80X9	Pregnancy with inconclusive fetal viability
Z34.01 Z34.02 Z34.03	Encounter for supervision of normal first pregnancy
Z34.81 Z34.82 Z34.83	Encounter for supervision of other normal pregnancy
Z34.91 Z34.92 Z34.93	Encounter for supervision of normal pregnancy; unspecified

REVISIONS AND UPDATES

Following is a record of changes we have made to our zero-cost preventive care benefit as we received new or updated information from the regulatory bodies tasked with preventive care recommendations.

Date of Change	Revision Details, Applicable Demographics, and Effective Dates of Changes		
02/19/2020	Change/Revision	Demographic	Effective Date
	Added diagnosis code D50.9 as eligible for colorectal cancer screenings	Adults	Retroactive to 02/01/2020
05/04/2020	Change/Revision	Demographic	Effective Date
	Adjusted age-banding for hearing screenings	Children and Adolescents	Retroactive to 01/01/2019
	Added Hearing Screening section in the adult recommendations to support Bright Futures recommendations	Adults	Retroactive to 01/01/2019
08/31/2020	Change/Revision	Demographic	Effective Date
	Added CPT 0210U as an eligible syphilis screening	All	10/01/2020
01/28/2021	Change/Revision	Demographic	Effective Date
	Removed CPT 99201, CPT 92586, and HCPCS G0297 (retired)	All	Retroactive to 01/01/2021
	Added CPTs 0500T, 71271, 92650, 92651, 92652, P3000, and P3001	All	Retroactive to 01/01/2021
	Language updates, where appropriate, for gender neutralization	All	Retroactive to 01/01/2021
04/09/2021	Change/Revision	Demographic	Effective Date
	Renamed "Maternity and Family Planning" for gender neutralization	Pre-Natal Care and Family Planning	05/01/2021
	Added clarifying note for providers regarding claim editing logic	All	05/01/2021
	Adjusted age-banding for Low-Dose CT Screening for Lung Cancer to age 50	Adults	Retroactive to 03/09/2021
	Renamed "Obesity Counseling and Screening" to "Healthy Diet and Exercise Counseling for Obesity"	Adults	05/01/2021
	Added clarification language for colorectal cancer screenings for those at increased risk due to medical conditions.	Adults	05/01/2021
	Updated recommendations for aspirin prophylaxis to neutralize gender	Adults	05/01/2021
05/19/2021	Change/Revision	Demographic	Effective Date
	Adjusted age recommendation for colorectal cancer screenings. Previously eligible for adults age 50-75; now eligible for adults beginning at age 45 for general screenings.	Adults	06/01/2021

<table>
<tr><th>Date of Change</th><th>Revision Details, Applicable Demographics, and Effective Dates of Changes</th></tr>
<tr><td>10/26/2021</td><td>
<table>
<tr><th>Change/Revision</th><th>Demographic</th><th>Effective Date</th></tr>
<tr><td>Added provider specialties to Breast Feeding Support recommendation to clarify that preventive benefits are only eligible with lactation consultants and registered nurses.</td><td>Pre-Natal Care and Family Planning for Persons of Child-Bearing Capacity of All Ages</td><td>11/1/2021</td></tr>
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<tr><td>12/16/2021</td><td>
<table>
<tr><th>Change/Revision</th><th>Demographic</th><th>Effective Date</th></tr>
<tr><td>Added missing prior approval alert to Low-Dose CT Screening for Lung Cancer</td><td>Adults 18 and Older</td><td>01/01/2022</td></tr>
<tr><td>Added PCV20 to Pneumococcal conjugate</td><td>Adults 18 and Older</td><td>01/01/2022</td></tr>
<tr><td>Added Vermont-state-specific services to Contraceptive Methods</td><td>Pre-Natal Care and Family Planning</td><td>01/01/2022</td></tr>
<tr><td>Added Vermont-state-specific Obstetric Professional Care services</td><td>Pre-Natal Care and Family Planning</td><td>01/01/2022</td></tr>
<tr><td>Added Vermont-state-specific Obstetric Ultrasound services</td><td>Pre-Natal Care and Family Planning</td><td>01/01/2022</td></tr>
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<tr><td>01/04/2022</td><td>
<table>
<tr><th>Change/Revision</th><th>Demographic</th><th>Effective Date</th></tr>
<tr><td>Adjusted age for prostate screening up to age 69</td><td>Adults 18 and older</td><td>02/01/2022</td></tr>
<tr><td>Removed the following deleted HCPCS codes per adaptive maintenance cycle: J7303, Q0090, Q9984</td><td>Pre-Natal Care and Family Planning</td><td>retrospective</td></tr>
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<tr><td>07/01/2022</td><td>
<table>
<tr><th>Change/Revision</th><th>Demographic</th><th>Effective Date</th></tr>
<tr><td>Added Code 90739 as eligible vaccines and Immunization section</td><td>Adults 18 and older</td><td>07/01/2022</td></tr>
<tr><td>Added Code 90759 as eligible vaccines and Immunization section</td><td>Adults 18 and older</td><td>07/01/2022</td></tr>
<tr><td>Adjustment of information contained in footnote; does not impact processing</td><td>Adults 18 and older Pre-Natal Care and Family Planning</td><td>N/A</td></tr>
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<tr><td>10/01/2022</td><td>
<table>
<tr><th>Change/Revision</th><th>Demographic</th><th>Effective Date</th></tr>
<tr><td>Removal of asterisk and adjustment of information contained in footnote; does not impact processing</td><td>Pre-Natal Care and Family Planning</td><td>N/A</td></tr>
<tr><td>Added Code 90611 and 90622 as eligible vaccines and Immunization section</td><td>Adults 18 and older</td><td>07/26/2022</td></tr>
<tr><td>Added Code 87593</td><td>All sections</td><td>07/26/2022</td></tr>
<tr><td>Added Code 87389 for HIV screening</td><td>All sections</td><td>10/01/2022</td></tr>
<tr><td>Added code 0353U -Chlamydia & Gonorrhea Screenings Section</td><td>All Sections</td><td>10/01/2022</td></tr>
<tr><td>Added code 0354U – Cervical Cancer Screening & HPV Testing Section</td><td>All Sections</td><td>10/01/2022</td></tr>
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01/2023	Change/Revision	Demographic	Effective Date
	Tuberculosis Screening Added Codes: 86480, 86481, 86580	All Sections	01/2023
	'Mpox' will become a preferred term, replacing monkeypox, after a transition period of one year. This serves to mitigate the concerns raised by experts about confusion caused by a name change in the midst of a global outbreak. It also gives time to complete the ICD update process and to update WHO publications.	All Sections	01/2023
	Gonorrhea Screening Sections added eligible diagnosis code Z11.8.	All Sections	01/2023
	Added Section Prevention of Human Immunodeficiency Virus (HIV) Infection; Preexposure Prophylaxis Kidney Function Testing Added codes 82565, 82575.	All Sections	01/2023
	Removal of diagnosis requirements for depression screening	All Sections	01/2023
	Removal of diagnosis requirements for Alcohol Misuse Screening and Behavioral Counseling Interventions	All Sections	01/2023
07/2023	Change/Revision	Demographic	Effective Date
	Added Pneumococcal conjugate (PCV13, PCV15): Added code 90671	All Sections	05/2023
	Added Breast Pumps and Related Supplies: Added code K1005 100 bags per month or 300 bags per 3 months.	Pre-Natal Care and Family Planning for Persons of Child-Bearing Capacity of All Ages	07/2023
	Added Vaccines and Immunizations: COVID-19 Vaccines Procedure Codes: 91302, 91303, 91304, 91310, 91312, 91313 Added COVID-19 Administration Procedure Codes: 0021A, 0022A, 0031A, 0034A, 0041A, 0042A ,0044A, 0104A, 0121A, 0124A, 0134A	18 years and older	07/2023
	Added Vaccines and Immunizations: COVID-19 Vaccines Procedure Codes: 91304, 91312, 91313, 91314, 91315, 91316, 91317 Added COVID-19 Administration Procedure Codes: 0041A, 0042A, 0044A, 0124A, 0134A, 0141A, 0142A, 0144A, 0151A, 0154A, 0164A 0171A, 0172A, 0173A, 0174A	Birth to 17 years of age	07/2023
	Added Vaccines and Immunizations: COVID-19 Vaccines Procedure Codes: 91302, 91303, 91304, 91310, 91312, 91313 Added COVID-19 Administration Procedure Codes: 0021A, 0022A, 0031A, 0034A, 0041A, 0042A ,0044A, 0104A, 0121A, 0124A, 0134A	Pre-Natal Care and Family Planning for Persons of Child-Bearing Capacity of All Ages	07/2023

09/11/2023

Change/Revision	Demographic	Effective Date
Added COVID-19 Codes: 91318, 91319, 91320, 91321, 91322, 90480	All Sections	09/11/2023
Revised COVID-19 Code 91304	All Sections	09/11/2023
Deleted COVID-19 Administration Codes: 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0021A, 0022A, 0031A, 0034A, 0041A, 0042A, 0044A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A, 0091A, 0092A, 0093A, 0094A, 0104A, 0111A, 0112A, 0113A, 0121A, 0124A, 0134A, 0141A, 0142A, 0144A, 0151A, 0154A, 0164A, 0171A, 0172A, 0172A, 0173A, 0174A	All Sections	09/11/2023

10/2023

Change/Revision	Demographic	Effective Date
Added Vaccine Respiratory Syncytial Virus (RSV) Added codes: 90380, 90381, 90678, 90679	All Sections	10/2023
Added diagnosis codes T83.31XA, T83.31XD, T83.31XS, T83.32XA, T83.32XD, T83.32XS, T83.39XA, T83.39XD, T83.39XS	Contraceptive Methods	10/2023
Added code 0402U -Chlamydia, Gonorrhea & Sexually Transmitted Screenings Section	All Sections	10/2023

10/2023

Change/Revision	Demographic	Effective Date
Added Vaccine Respiratory Syncytial Virus (RSV) Administration Codes Added codes: 96380 & 96381	All Sections	10/06/2023

01/2024

Change/Revision	Demographic	Effective Date
Added Breast Pumps and Related Supplies: Deleted K1005, Code replaced with Code A4287 100 bags per month or 300 bags per 3 months.	Pre-Natal Care and Family Planning for Persons of Child-Bearing Capacity of All Ages	01/2024
Added procedure code 90623 - Meningococcal conjugate (MenACWY), Pentavalent vaccine, conjugated)	All Sections	01/2024
Added additional diagnoses codes (noted sections): Z30.011, Z30.012, Z30.013, Z30.014, Z30.015, Z30.016, Z30.017, Z30.018, Z30.019, Z30.02, Z30.09, Z30.430, Z30.432, Z30.433, Z30.2, Z30.8, Z30.40, Z30.41, Z30.431, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49, Z30.8, Z30.9	Cervical Cancer Screening and (HPV) Testing, Chlamydia Screening, Gonorrhea Screening, Hepatitis B Screening, Hepatitis C Screening, HIV Screening, Syphilis Screening	01/2024

	Added procedure code 88302, removed diagnosis code Z98.52	Contraception Methods	01/2024
	Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PrEP) Procedure Codes: Clarification codes addedJ0739, J0750, J0751, J0799 to current descriptors Administration: G0011, G0012, G0013, Q0516, Q0517, Q0518	Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PReP)	01/2024
	Removed nutritional counseling may require prior approval footnotes reference in document	Healthy Diet and Exercise Counseling for Obesity	01/2024

02 /2024	Change/Revision	Demographic	Effective Date
	Coverage includes member reimbursement for the cost of FDA-approved, cleared, or granted mobile device applications for use as contraception consistent with the FDA-approved, cleared, or granted indication.	Contraceptives and Supplements- [All ages & 18 Years and Older sections]	02/01/2024

04/2024	Change/Revision	Demographic	Effective Date
	Added Section: Healthy Diet and Exercise Counseling for Obesity	3-17 years of age	04/01/2024
	Added Section: Healthy Weigh and Weight Gain During Pregnancy	Pre-Natal Care and Family Planning for Persons of Child-Bearing Capacity of All Ages	04/01/2024
	Added procedure code 87806	All Sections	04/01/2024
	Added diagnosis code Z12.39 eligible with *procedure codes	Mammography Screening for Breast Cancer	Retroactive to 10/01/2023
	Clarification language removed shading on age bands	Colorectal Cancer Screening	04/01/2024
	Clarification language: Removed shading on age bands in section	Colorectal Cancer Screening	04/01/2024

	Clarification language: Clarified lactation consultant	Breast Feeding Support	04/01/2024
	Added procedure code 99459	All Sections	Retroactive to 01/01/2024
07/2024	Change/Revision	Demographic	Effective Date
	Deleted Code: 0353U	All applicable sections	07/01/2024
	Deleted Code: 0354U	All applicable sections	04/01/2024
	Removed Code 0402U	All applicable sections	07/01/2024
	Added Code 74263	Colorectal Cancer Screening	07/01/2024
	Removed Code 11980	Pre-Natal & Family Planning Section	07/01/2024
09/2024	Change/Revision	Demographic	Effective Date
	Added Code: 90684	Adults 18 and Older Vaccines and Immunizations Section	06/17/2024
	Added language under section Dual-Energy X-Ray Absorptiometry Scan for Bone Density- For women age 65 or older (or younger women with fracture risk as determined by a formal Clinical Risk Assessment Tool)	Adults 18 and Older	09/01/2024
	Added Category Descriptor: Antiretroviral Therapy for Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PrEeP)	All applicable sections	09/01/2024
	Removed PCV13, PCV15, PCV20 from category code and replace with Pneumococcal conjugate. Remove PCV 23 from category code and replace with Pneumococcal polysaccharide	All applicable sections	08/01/2024
	Deleted code: J7302	Contraception Section	08/01/2024

		Chlamydia Screening Added diagnosis codes: Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	All applicable sections	09/01/2024	
		Gonorrhea Screening Added diagnosis codes: Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	All applicable sections	09/01/2024	
		Hepatitis B Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	All applicable sections	09/01/2024	
		Hepatitis C Added procedure code: 87522 Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	Adult and Pre-Natal Care and Family Planning for Persons of Child-Bearing Capacity of All Ages sections	09/01/2024	
		HIV Screening Added procedure code: 87536 Added diagnosis codes: Z11.3, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53	All applicable sections	Effective 09/01/2024 (retroactive to 01/01/2024)	
		Prevention of Human Immunodeficiency Virus (HIV); Preexposure Prophylaxis (PrEP) Added Sections: Behavioral Counseling • Added procedure codes: G0011, G0013 • Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Added section Lipid Panel Screening for PrEP (DESCOVY) • Added procedure codes: 80061, 82465, 83718 • Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Added procedure code: 82610 to existing Kidney Function Testing Section • Added diagnosis code: Z29.81 to whole section to existing diagnoses code list Office Visit Section • Added procedure codes: 99202, 99203, 99204, 99205, 99211, 99212, 99213,99214, 99215	All applicable sections	09/01/2024	

	• Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Added Pregnancy Testing Section • Added procedure code: 81025 • Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Sexually Transmitted Infection Counseling Section • Added procedure code: G0445 • Added diagnosis codes: Z11.3, Z11.4, Z20.2, Z20.6, Z29.81, Z72.51, Z72.52, Z72.53 Syphilis Screening Section • Added diagnosis codes: Z11.4, Z20.2, Z20.6, Z29.81		

10/2024	Change/Revision	Demographic	Effective Date
	Added section to Pre-Natal Care: Respiratory Syncytial Virus (RSV) Vaccine Section. Added code: 90678 Respiratory Syncytial Virus (RSV) Vaccine Section. Added code: 90683	Pre-Natal Care [All ages & 18 Years and Older sections]	10/01/2024

01/2025	Change/Revision	Demographic	Effective Date
	Removed deleted code 0500Tand replaced with code 87626	All Applicable Sections	01/01/2025
	Added code A4267	All Applicable Sections	01/01/2025
	Added codes 0064U, 0065U, 86706 to (PrEP), Syphilis & Hepatitis B Screening Sections	All Applicable Sections	01/01/2025
	Prevention of Human Immunodeficiency Virus (HIV) Infection: Antiretroviral Section Added code Q0521	All Applicable Sections	01/01/2025
	Removed Foot Note for Prior Approval for Code 74263- Refer to Prior Approval List for Monitored Anesthesia.	All Applicable Sections	01/01/2025

04/01/2025	Change/Revision	Demographic	Effective Date
	Added codes 99174 & 99177 to Vision Screening Section. Vision Screening eligible up to age 21. Vision Screening subject to (1) Screening per year.	All Applicable Sections	04/01/2025
	Added Section Dual-Energy X-Ray Absorptiometry Scan for Bone Density (Women with Risk Factor ages 35 +). Added Procedure Code: 77080, added Diagnosis code Z82.62.	All Applicable Sections	04/01/2025

	Corrected error under Tuberculosis Section Diagnosis code Z00.0 should be Z00.00.	18 & Older Section	04/01/2025

06/01/2025	Change/Revision	Demographic	Effective Date
	Removed code 90653 from Pre-Natal & Birth to age 17 Sections. Added code to 18 older section with age of 65+ years	All Applicable Sections	06/01/2025
	Remove deleted code 96040	18 & Older Section	01/01/2025
	Added code 96041	18 & Older Section	01/01/2025
	Corrected Diagnosis Z86.010 to Z86.0100 and added codes Z86.0101, Z86.0102, Z86.0109 to the Colorectal Cancer Screening Section	18 & Older Section	10/01/2024
	Under Obstetric Ultrasound added clarifying language to one ultrasound per pregnancy	Pre-Natal Care Section	06/01/2025

07/01/2025	Change/Revision	Demographic	Effective Date
	Added codes: 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015 to sections, PReP, and Well Exam for Contraception Management.	All Applicable Sections	01/01/2025

05/01/2025	Change/Revision	Demographic	Effective Date
	Added codes 0464U to Colorectal Cancer Screening Section.	18 & Older Section	08/01/2025

06/01/2025	Change/Revision	Demographic	Effective Date
	Added code 86704 to Hepatitis B Screening Section.	Birth to 17 18 & Older Pre-Natal Care Section	09/01/2025 (retroactive to 01/01/2025)
10/01/2025	Change/Revision	Demographic	Effective Date
	Added codes J0738, J0752 to section: Antiretroviral Therapy for Prevention of Human Immunodeficiency Virus (HIV) Infection: Pre-Exposure Prophylaxis (PrEP)	All Applicable Sections	10/01/2025
	Added code A4288 to section: Breast Pump and Related Supplies	Pre-Natal Care Section	10/01/2025