



National Compliance Update

USI EMPLOYEE BENEFITS

April 21, 2020

New Mandatory Preventive Items and Services

Most plans will be required to cover new preventive items and services in 2021 and 2022, including several related to the human immunodeficiency virus (“HIV”).

Additionally, the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”) requires coverage for any COVID-19 related preventive care services within 15 days.¹

BACKGROUND

Non-grandfathered group health plans must provide coverage for in-network preventive items and services and may not impose any cost-sharing requirements (such as a copayment, coinsurance, or deductible) with respect to those items or services.²

Evidence-based items or services that have in effect a rating of A or B in the current recommendations of the United States Preventive Services Task Force (“USPSTF”) are considered to be “preventive.” The USPSTF recommendations can change and those changes generally apply for plan years that begin on or after the date that is one year after the date the new recommendation or guideline is issued.

NEW PREVENTIVE ITEMS AND SERVICES

The newly covered items and services are as follows:

¹ [CARES Act Section 3203](#).

² If a plan or carrier does not have in its network a provider who can provide the required preventive care item or service, the plan or carrier must cover the item or service when performed by an out-of-network provider, and may not impose cost-sharing with respect to the item or service.

Topic	USPSTF Recommendation	Effective for Plan Years Beginning
Hepatitis C virus infection screening: adults aged 18 to 79 years	Screening for hepatitis C virus (HCV) infection in adults aged 18 to 79 years.	2022
Abdominal aortic aneurysm screening: men	1-time screening for abdominal aortic aneurysm with ultrasonography in men aged 65 to 75 years who have ever smoked.	2021
Bacteriuria screening: pregnant women	Screening for asymptomatic bacteriuria using urine culture in pregnant persons.	2021
Breast cancer preventive medication	Clinicians offer to prescribe risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors, to women who are at increased risk for breast cancer and at low risk for adverse medication effects.	2021
BRCA risk assessment and genetic counseling/testing	Primary care clinicians assess women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer or who have an ancestry associated with breast cancer susceptibility 1 and 2 gene mutations with an appropriate brief familial risk assessment tool. Women with a positive result on the risk assessment tool should receive genetic counseling and, if indicated after counseling, genetic testing.	2021
Hepatitis B screening: pregnant women	Screening for hepatitis B virus (HBV) infection in pregnant women at their first prenatal visit	2021
HIV preexposure prophylaxis (PrEP) for the prevention of HIV infection ³	Clinicians offer PrEP with effective antiretroviral therapy to persons who are at high risk of HIV acquisition.	2021
HIV screening: adolescents and adults ages 15 to 65 years	Clinicians screen for HIV infection in adolescents and adults aged 15 to 65 years. Younger adolescents and older adults who are at increased risk of infection should also be screened.	2021
HIV screening: pregnant women	Clinicians screen for HIV infection in all pregnant persons, including those who present in labor or at delivery whose HIV status is unknown.	2021
Perinatal depression: counseling and intervention	Clinicians provide or refer pregnant and postpartum persons who are at increased risk of perinatal depression to counseling interventions.	2021
Gonorrhea prophylactic medication: newborns	Prophylactic ocular topical medication for all newborns to prevent gonococcal ophthalmia neonatorum.	2021

³ PrEP is a way for people who do not have HIV but who are at very high risk of getting HIV to prevent HIV infection by taking a pill every day. The pill (brand name Truvada) contains two medicines (tenofovir and emtricitabine) that are used in combination with other medicines to treat HIV. When someone is exposed to HIV through sex or injection drug use, these medicines can work to keep the virus from establishing a permanent infection. When taken daily, PrEP is highly effective for preventing HIV. Studies have shown that PrEP reduces the risk of getting HIV from sex by about 99% when taken daily. <https://www.cdc.gov/hiv/risk/prep/index.html>

RAPID COVERAGE FOR A COVID-19 VACCINE

As stated above, plans usually have one year to cover services recommended by the USPSTF. However, under the CARES Act, new preventive services related to COVID-19 (e.g., a vaccine) must be covered by a non-grandfathered group health plan within 15 days.

At the time of publication, no such vaccine is available. However, a vaccine may become available later this year or in 2021.

While it appears that this requirement applies only to non-grandfathered plans, further guidance may extend such coverage to grandfathered plans.

EMPLOYER NEXT STEPS

Employers sponsoring non-grandfathered group health plans should review the various preventive care requirements effective for their 2021 plan years. Such coverage must be provided in-network, without cost-sharing.

- *Fully insured health plans.* Carriers are generally responsible for compliance and should include these benefits as applicable.
- *Self-funded health plans.* Discuss with TPAs to ensure coverage is in effect for plan years that begin on or after January 1, 2021.

Should a vaccine for COVID-19 become available, group health plans will want to move quickly to ensure coverage is provided in-network without cost-sharing.

FOR MORE INFORMATION

For a complete list of preventive items and services, visit:

<http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations>

USI usi.com/locations

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