

## Preferred Administrators Preventive Services FY 2015/2016

<b>Preventive Service:</b> <i>(Fiscal Year starts 10/1-9/30)</i>	<b>CPT Code(s):</b>	<b>ICD9 Diagnosis Code(s)</b>	<b>ICD10 Diagnosis Code(s)</b> <i>Note: ICD-10 codes are effective 10/1/15</i>
Abdominal aortic aneurysm screening: men The USPSTF recommends one-time screening for abdominal aortic aneurysm by ultrasonography in men aged 65 to 75 who have ever smoked.	<b>76700, 76705, 76770, 76775, G0389</b>	<b>V15.82, V70.0, V70.9</b>	<b>Z00.00, Z00.01, Z00.8, Z87.891, Z00.8</b>
Alcohol misuse counseling The USPSTF recommends screening and behavioral counseling interventions to reduce alcohol misuse by adults, including pregnant women, in primary care settings.	<b>G0442, G0443 99408-99409,</b>	<b>V22.0, V22.1, V22.2, V23.89, V70.0, V70.9, V79.1</b>	<b>O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z33.1, Z00.00, Z00.01, Z00.8, Z13.89, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93</b>  <b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Anemia screening: pregnant women The USPSTF recommends routine screening for iron deficiency anemia in asymptomatic pregnant women.</p>	<p><b>85013, 85014, 85018</b></p>	<p><b>V22.0, V22.1, V22.2, V23.0, V23.1, V23.2, V23.3, V23.4, V23.41, V23.42, V23.49, V23.5, V23.7, V23.8, V23.81, V23.82, V23.83, V23.84, V23.85, V23.86, V23.87, V23.89, V70.0, V70.9, V78.0</b></p>	<p><b>O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.211, O09.212, O09.213, O09.219, O09.291, 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, O09.811, 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, O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z00.00, Z00.01, Z00.8, Z13.0, 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</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Aspirin to prevent CVD: men The USPSTF recommends the use of aspirin for men age 45 to 79 years when the potential benefit due to a reduction in myocardial infarctions outweighs the potential harm due to an increase in gastrointestinal hemorrhage</p>	<p><b>99386-99387, 99396-99397, 99401-99404</b></p>	<p><b>V20.2, V70.0, V70.9, V78.8</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z00.121, Z00.129, Z00.8</b></p>
<p>Aspirin to prevent CVD: women The USPSTF recommends the use of aspirin for women age 55 to 79 years when the potential benefit of a reduction in ischemic strokes outweighs the potential harm of an increase in gastrointestinal hemorrhage.</p>	<p><b>85013, 85014, 85018</b></p>	<p><b>V20.2, V70.0, V70.9, V78.8</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z00.121, Z00.129,</b></p>

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Bacteriuria screening: pregnant women The USPSTF recommends screening for asymptomatic bacteriuria with urine culture for pregnant women at 12 to 16 weeks gestation or at the first prenatal visit, if later.</p>	<p><b>87086, 87088</b></p>	<p><b>V22.0, V22.1, V22.2, V23.0, V23.1, V23.2, V23.3, V23.4, V23.41, V23.42, V23.49, V23.5, V23.7, V23.8, V23.81, V23.82, V23.83, V23.84, V23.85, V23.86, V23.87, V23.89, V72.31, V72.62</b></p>	<p><b>Z00.00, Z01.411, Z01.419, 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, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.211, O09.212, O09.213, O09.219, O09.291, 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, O36.80X0, O36.80X1, O36.80X2, O36.80X3, O36.80X4, O36.80X5, O36.80X9</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Blood pressure screening The USPSTF recommends screening for high blood pressure in adults aged 18 and older.</p>	<p><b>99385-99387, 99395-99397, 99401-99404</b></p>	<p><b>V20.2, V70.0, V70.9, V81.1</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z00.121, Z00.129, Z13.6</b></p>
<p>BRCA Lab Screening and Genetic Counseling and Evaluation for BRCA Testing; The USPSTF recommends that primary care providers screen women who have family members with breast, ovarian, tubal, or peritoneal cancer with one of several screening tools designed to identify a family history that may be associated with an increased risk for potentially harmful mutations in breast cancer susceptibility genes (<i>BRCA1</i> or <i>BRCA2</i>). Women with positive screening results should receive genetic counseling and, if indicated after counseling, BRCA testing.</p>	<p><b>99401-99404, 81211-81217, 99201-99205, 99385-99397, G0463, 96040, S0265, 96040, S0265,36415, 36416</b></p> <p><b>All BRCA Labs require a prior- authorization</b></p>	<p><b>V10.3, V16.3, V72.31 V10.43, V16.41</b></p>	<p><b>Z80.3, Z80.41, Z85.3, Z85.43, Z15.01, Z15.02</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Breast cancer preventive medication The USPSTF recommends that clinicians discuss chemoprevention with women at high risk for breast cancer and at low risk for adverse effects of chemoprevention. Clinicians should inform patients of the potential benefits and harms of chemoprevention.</p>	<p><b>99401-99404</b></p>	<p><b>V10.3, V16.3, V20.2, V70.0, V70.9, V72.31</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z00.121, Z00.129, Z01.411, Z01.419, Z80.3, Z85.3</b></p>
<p>Breast cancer screening The USPSTF recommends screening mammography for women, with or without clinical breast examination, every 1-2 years for women aged 40 and older.</p>	<p><b>77057, 77052, 77063, G0202, G0204, G0279</b>  <b>Revenue Code 0403</b></p>	<p><b>V72.31, V76.10, V76.11, V76.12, V76.19</b></p>	<p><b>Z01.411, Z01.419, Z12.31, Z12.39,</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
Breastfeeding counseling The USPSTF recommends interventions during pregnancy and after birth to promote and support breastfeeding.	<b>99385-99386, 99395-9396, 99401-99404, A4281, A4286, E0602-E0603</b>	<b>V24.1, V72.31</b>	<b>Z01.411, Z01.419, Z39.1</b>

**The purchase of a portable double electric pump (non-hospital grade)**

**A purchase will be covered once every five years following the date of the birth. If a portable double electric pump was purchased within the previous period, the purchase of a portable double electric pump will not be covered until a five year period has elapsed from the last purchase of an electric pump.**

**The purchase of a manual breast pump**

**A purchase will be covered once every five years following the date of the birth. If a manual pump was purchased within the previous period, the purchase of a manual pump will not be covered until a five year period has elapsed from the last purchase of an electric pump.**

**Breast Pump Supplies**

**Coverage is limited to only one per pregnancy in a year where a covered female would not qualify for the purchase of a new pump. Coverage for the purchase of breast pump equipment is limited to one item of equipment for the same or similar purpose, and the accessories and supplies needed to operate the item. The covered Associate or its dependent is responsible for the entire cost of any additional same or similar equipment that is purchased or rented for personal convenience or mobility.**

## Breast Pump Reimbursement

**Note if provider is submitting for reimbursement Pre-Auth will be required for all electric and manual breast pumps. We have reimbursement fees for these services, therefore, an invoice is required. Reimbursement will be coordinated between Case Management, Contracting, and the DME Provider.**

**Note if member is submitting for reimbursement:**

**Effective 12/1/13, members can submit a member reimbursement for the purchase of a portable double electronic non-hospital grade breast pump. Preferred Administrators will reimburse for a breast pump up to \$200.00 dollars or up to \$50.00 dollars for supplies. These items can be purchased at any retailer or pharmacy. Member will be reimbursed when they have submitted the following:**

- **Member Reimbursement Form**  
This form can be downloaded at [www.preferredadmin.net](http://www.preferredadmin.net)
- **Receipt**
- **Prescription form OB Provider**

**The TPA Department will review that the Member Reimbursement Form and attachments are complete, sign and take to Claims for processing.**

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
Cervical cancer screening The USPSTF strongly recommends screening for cervical cancer in women who have been sexually active and have a cervix.	88141-88148, 88150-88152- 88155, 88164,88165, 88166 88167, 88174- 88175,G0101, G0123 G0124, G0141, G0143- G0145, G0147- G0148, Q0091	V70.0, V72.31, V72.32, V76.2, V76.47	Z00.00, Z00.01, Z01.411, Z01.419, Z01.42, Z12.4, Z12.72
Chlamydia infection screening: non-pregnant women The USPSTF recommends screening for chlamydia infection for all sexually active non-pregnant young women age 24 and younger and for older non-pregnant women who are at increased risk.	86631-86632, 87110, 87270, 87320, 87490- 87492, 87810, 87801	V70.0, V70.9, V72.31, V73.88, V73.98	Z00.00, Z00.01, Z00.8, Z01.411, Z01.419, Z11.8  <b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b>
Chlamydia infection screening: pregnant women The USPSTF recommends screening for Chlamydia infection for all pregnant women age 24 and younger and for older pregnant women who are at increased risk.	88631-88632, 87110, 87270, 87320, 87490- 87492, 87810, 87801	V22.0, V22.1, V22.2, V23.89, V70.0, V70.9, V72.31, V73.88, V73.98	Z00.00, Z00.01, Z00.8, Z01.411, Z01.419, Z11.8, 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, O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899 <b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b>

## Preferred Administrators Preventive Services FY 2015/2016

<b>Preventive Service:</b>	<b>CPT Code(s):</b>	<b>ICD9 Diagnosis Code(s)</b>	<b>ICD10 Diagnosis Code(s)</b>
Cholesterol abnormalities screening: men 35 and older The USPSTF strongly recommends screening men aged 35 and older for lipid disorders.	<b>80061, 82465 83718, 83719, 83721</b>	<b>V70.0, V70.9, V77.91</b>	<b>Z00.00, Z00.01, Z00.8, Z13.220</b>
Cholesterol abnormalities screening: men younger than 35 The USPSTF recommends screening men aged 20 to 35 for lipid disorders if they are at increased risk for coronary heart disease.	<b>80061, 82465 83718, 83719, 83721</b>	<b>V70.0, V70.9, V77.91</b>	<b>Z00.00, Z00.01, Z00.8, Z13.220</b>
Cholesterol abnormalities screening: women 45 and older The USPSTF strongly recommends screening women aged 45 and older for lipid disorders if they are at increased risk for coronary heart disease.	<b>80061, 82465 83718, 83719, 83721</b>	<b>V70.0, V70.9, V77.91</b>	<b>Z00.00, Z00.01, Z00.8, Z13.220</b>

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Cholesterol abnormalities screening: women younger than 45 The USPSTF recommends screening women aged 20 to 45 for lipid disorders if they are at increased risk for coronary heart disease.</p>	<p><b>80061, 82465 83718, 83719, 83721</b></p>	<p><b>V70.0, V70.9, V77.91</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z13.220</b></p>
<p>Cholesterol abnormalities screening: women younger than 45 The USPSTF recommends screening women aged 20 to 45 for lipid disorders if they are at increased risk for coronary heart disease.</p>	<p><b>80061, 82465 83718, 83719, 83721</b></p>	<p><b>V70.0, V70.9, V77.91</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z13.220</b></p>

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Colorectal cancer screening The USPSTF recommends screening for colorectal cancer using fecal occult blood testing, sigmoidoscopy, or colonoscopy, in adults, beginning at age 50 years and continuing until age 75 years. The risks and benefits of these screening methods vary.</p> <p><b>** Colorectal Cancer Screening</b> is restricted to primary diagnosis and claim will pay as preventive if billed with primary diagnosis listed. If preventive diagnosis is not billed as primary, the claim will process as medical and member will have cost share.</p> <p><b>**Colorectal Cancer Screenings</b> are only for adults beginning at age 50 years and continuing until age 75.</p>	<p><b>G0104-G0106 G0120-G0122, 45330,45378, 45380, 45385,74263, 82270, 82274, G0328, G0464</b></p> <p><b>Requires Prior Authorization except for codes 74263, 82270, 82274</b></p> <p><b>Revenue Codes 0750, 0490</b></p>	<p><b>V16.0, V70.0, V70.9, V76.41, V76.50, V76.51, V76.52</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z12.10, Z12.11, Z12.12, Z12.13, Z80.0</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s) Note: ICD-10 codes are effective 10/1/15
<p>Contraceptive methods to include sterilization and Contraceptive Counseling. All Contraceptive methods, services, and supplies covered must be approved by the Food and Drug Administration (FDA). Coverage includes counseling services on contraceptive methods provided by a Physician, Obstetrician or Gynecologist. Covered Contraceptive to include Female Generic Prescription Drugs are covered.</p> <p>All IUDs are covered by the Medical Plan to include its insertion and removal.</p> <p>Please refer to the list of female generic medications posted online. These medications are reimbursed by our RX Pharmacy Vendor (OptumRx).</p>	<p><b>99401-99404, 99354-99355, 99201-99205, 99211-99215, 99241-99245, 58600-58615, 58670-58671, 58300-58301, J7300-J7307, 11980-11981, 11983, 57170, A4266, A4267, A4261, A4264, J1055, J1050, 96372, 58565</b></p> <p><b>The following CPT code has been discontinued effective January 1, 2016. J7302- Code has been replaced with J7297 and J7298</b></p>	<p><b>V25.0, V25.01, V25.02, V25.03, V25.04, V25.09, V25.1, V25.11, V25.12, V25.13, V25.2, V25.3, V25.4, V25.40, V25.41, V25.42, V25.43, V25.49, V25.5, V25.8, V25.9</b></p>	<p><b>Z30.011, Z30.012, Z30.013, Z30.014, Z30.018, Z30.019, Z30.02, Z30.09, Z30.2, Z30.40, Z30.41, Z30.42, Z30.430, Z30.431, Z30.432, Z30.433, Z30.49, Z30.8, Z30.9</b></p>
<p>Sterilization for men</p>	<p><b>99201-99205 99211-99215 55250, 55450</b></p>	<p><b>V25.2</b></p>	<p><b>Z30.2</b></p>

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Dental caries chemoprevention: preschool children The USPSTF recommends that primary care clinicians prescribe oral fluoride supplementation at currently recommended doses to preschool children older than 6 months of age whose primary water source is deficient in fluoride.</p>	<p>Reimbursed by Pharmacy (Optum)</p>		
<p>Depression screening: adolescents The USPSTF recommends screening of adolescents (12-18 years of age) for major depressive disorder when systems are in place to assure accurate diagnosis, psychotherapy (cognitive-behavioral or interpersonal), and follow-up.</p>	<p><b>99381-99387, 99391-99397, 99401-99404</b></p>	<p><b>V79.0</b></p>	<p><b>Z13.89</b></p>

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Depression screening: adults The USPSTF recommends screening adults for depression when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment, and follow-up.</p>	<p><b>99381-99387, 99391-99397, 99401-99404</b></p>	<p><b>V79.0</b></p>	<p><b>Z13.89</b></p>
<p>Developmental screening (EG developmental milestone survey). Covered as a preventive screening for children 0- 3 years of age.</p>	<p><b>96110</b></p>	<p><b>V20.2</b></p>	<p><b>Z00.121, Z00.129</b></p>
<p>Diabetes screening The USPSTF recommends screening for type 2 diabetes in asymptomatic adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg.</p>	<p><b>82947-82952, 82962, 83036</b></p>	<p><b>V70.0, V70.9, V77.1</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z13.1</b></p>
<p>Folic acid supplementation The USPSTF recommends that all women planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 mg (400 to 800 µg) of folic</p>	<p>Reimbursed by Pharmacy (Optum)</p>		

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Gestational diabetes Screening in pregnant women The USPSTF recommends gestational diabetes screening 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.</p>	<p><b>82947-82952, 82962, 83036</b></p>	<p><b>V22.0, V22.1, V22.2, V70.0, V70.9, V77.1</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z13.1, 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</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>
<p>Gonorrhea prophylactic medication: newborns The USPSTF strongly recommends prophylactic ocular topical medication for all newborns against gonococcalophthalmiae onatorum.</p>	<p>Reimbursed by Pharmacy (Optum)</p>		

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Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Gonorrhea screening: women The USPSTF recommends that clinicians screen all sexually active women, including those who are pregnant, for gonorrhea infection if they are at increased risk for infection (that is, if they are young or have other individual or population risk factors).</p>	<p><b>87590-87592, 87850, 87801</b></p>	<p><b>V22.0, V22.1, V22.2, V23.89, V70.0, V70.9, V72.31, V74.5, V75.9</b></p>	<p><b>O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z00.00, Z00.01, Z00.8, Z01.411, Z01.419, Z11.3, Z11.9, 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</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>
<p>Healthy diet counseling The USPSTF recommends intensive behavioral dietary counseling for adult patients with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease. Intensive counseling can be delivered by primary care clinicians or by referral to other specialists, such as nutritionists or dietitians.</p>	<p><b>98960</b></p>	<p><b>V70.0, V70.9</b></p>	<p><b>Z00.00, Z00.01, Z00.8</b></p>

**Preferred Administrators Preventive Services  
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Hearing loss screening: newborns The USPSTF recommends screening for hearing loss in all newborn infants.	<b>92551-92553</b>	<b>V20.2, V20.31</b>	<b>Z00.110, Z00.121, Z00.129</b>

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<p>Hemoglobinopathies screening: newborns The USPSTF recommends screening for sickle cell disease in newborns.</p>	<p><b>83020-83021, 83026, 85660</b></p>	<p><b>V18.9, V20.2, V20.31, V78.2</b></p>	<p><b>Z00.110, Z00.121, Z00.129, Z13.0, Z84.81</b></p>
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<b>Preventive Service:</b>	<b>CPT Code</b>	<b>ICD9 Diagnosis Code(s)</b>	<b>ICD10 Diagnosis Code(s)</b>
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<p>Hepatitis C screening  Recommends screening for everyone ages 15-65, and other ages at increased risk.</p>	<p><b>86803,</b>  <b>86804,</b>  <b>G0472,</b>  <b>36415,</b>  <b>36416</b></p>	<p>ICD-9 042, 054.10- 054.13  054.19, 078.10, 078.11, 078.19,  079.4,079.53, 079.88- 079.98,  090.0- 090.3, 090.40- 090.42,  090.49, 090.5 - 090.7, 090.9, 091.0 -  091.4, 091.50-091.52, 091.61,  091.69, 091.7, 091.81-091.82,  091.89-093.24, 093.81- 093.82,  093.89, 093.9, 094.0-094.3 094.81-  094.89, 094.9, 095.0- 095.9, 096,  097.0- 097.1, 097.9, 098.0- 098.19,  098.2, 098.30- 098.43, 098.49-  098.53, 098.59, 098.6- 098.7, 098.81  -098.89, 099.0-099.41, 099.49-  099.59, 099.8- 099.9, 131.00-  131.03, 131.09, 131.8-131.9, 286.0-  286.4, 286.52-286.53,286.59, 286.6-  286.9, 304.00- 304.10-304.13,  304.20- 304.23, 304.30-304.33,  304.40-304.43, 304.50- 304.53,  304.60- 304.63, 304.70-304.73,  304.80-304.83, 304.90-304.93,  555.0- 555.2, 555.9, 556.0, 556.1-  556.9, 585.3-, 585.6, 608.4, 614.9,  616.10-616.11, 647.00-647.04,  647.10-647.14, 647.20-647.24,  647.30-647.34, 648.30-648.34,  655.30-655.33, 655.50- 655.53,  669.30, 669.32, 669.34, 760.2,  V01.6, V01.79, V02.7, V02.8,  V07.39, V07.39, V08, V12.3, V15.85,  V42.0- V42.6, V42.81- V42.84,  V42.89, V42.9, V45.11 , V56.0,  V56.31- V56.32, V56.8, V58.2,  V59.01- V59.02, V59.09, V59.1-  V59.9, V65.44, V69.2, V70.0, V71.5,  V73.89, V73.99, V74.5, V75.9,  V83.01, V83.02, V87.46, V22.0 –  V23.9, V91.00-V91.99</p>	<p>A51.46, A51.49, A51.5, A51.9, A52.00,  A52.01, A52.02, A52.03, A52.04, A52.05,  A52.06, A52.09, A52.10, A52.11, A52.12,  A52.13, A52.14, A52.15, A52.16, A52.17,  A52.19, A52.2, A52.3,A52.71, A52.72,  A52.73,A52.74,A52.75,A52.76,A52.77  ,A52.78,A52.79,A52.8,A52.9,A53.0, A53.9,  A54.00, A54.01, A54.02, A54.03,  A54.09,A54.1,A54.21,A54.22,A54.23,  A54.24,A54.29, A54.30,A54.31,A54.32,  A54.33,A54.39,A54.40,A54.41,A54.42,A54.4  3,A54.49,A54.5,A54.6,  A54.81,A54.82,A54.83,  A54.84,A54.85,A54.86,A54.89,A54.9,A55,A5  6.00,A56.01,A56.02,A56.09,A56.11,  A56.19, A56.2, A56.3, A56.4, A56.8, A57,  A58, A59.00, A59.01, A59.02, A59.03,  A59.09, A59.8, A59.9, A60.00,  A60.01, A60.02, A60.03, A60.04, A60.09,  A60.1, A60.9, A63.0, A63.8, A64, A74.81,  A74.89, A74.9, B07.8, B07.9, B20, B97.35,  B97.7, D65, D66, D67, D68.0, D68.1, D68.2,  D68.311, D68.312, D68.318, D68.32, D68.4,  D68.8, D68.9,</p>
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<p>Hepatitis C screening  Recommends screening for everyone ages 15-65, and other ages at increased risk.</p>	<p><b>86803,  86804,  G0472,  36415,  36416</b></p>		<p>F11.20,F11.21,F11.220,F11.221,F11.222, F11.229,F11.23,F11.24, F11.250,F11.251,F11.259,F11.281, F11.282,F11.288,F11.29,F12.20,F12.21, F12.220,F12.221,F12.222,F12.229, F12.250,F12.251,F12.259,F12.280,F12.288,F12.29,F13.20,F13.21,F13.220,F13.221, F13.229,F13.230,F13.231, F13.232,F13.239,F13.24,F13.250,F13.251, F13.259,F13.26,F13.27,F13.280, F13.281,F13.282,F13.288,F13.29,F14.20, F14.21,F14.220,F14.221,F14.222, F14.229,F14.23,F14.24,F14.250,F14.251, F14.259,F14.280,F14.281,F14.282, F14.288,F14.29,F15.20,F15.21,F15.220, F15.221,F15.222,F15.229,F15.23, F15.24,F15.250,F15.251,F15.259,F15.280, F15.281,F15.282,F15.288,F15.29,F16.20,F16.21,F16.220,F16.221,F16.229, F16.24,F16.250,F16.251,F16.259,F16.280,F16.283,F16.288,F16.29,F18.20, F18.21,F18.220,F18.221, F18.229,F18.24,F18.250,F18.251,F18.259, F18.27,F18.280,F18.288,F18.29, F19.20,F19.21,F19.220,F19.221,F19.222, F19.229,F19.230,F19.231,F19.232, F19.239,F19.24,F19.250,F19.251,F19.259, F19.26,F19.27,F19.280,F19.281, F19.282,F19.288,F19.29,</p> <p>K50.00,K50.011,K50.012,K50.013,K50.014, K50.018, K50.019,K50.10,K50.111,K50.112,K50.113, K50.114,K50.118,K50.119, K50.80, K50.811,K50.812,K50.813,K50.814,K50.818, K50.819, K50.90, K50.91 K50.912,K50.913,K50.914,K50.918,K50.919, K51.20,K51.211,K51.212,K51.213 K51.214,K51.218,K51.219,K51.30,K51.311, K51.312,K51.313, K51.314,K51.318,K51.319,K51.40,K51.411, K51.412,K51.413,K51.414,K51.418, K51.419, K51.50,K51.511,K51.512,K51.513,K51.514, K51.518,K51.519,K51.80 K51.811,K51.812,K51.813,K51.814,K51.818, K51.819,K51.90,K51.911,K51.912 K51.913,K51.914,K51.918,K51.919</p>
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<p>Hepatitis C screening  Recommends screening for everyone ages 15-65, and other ages at increased risk.</p>	<p><b>86803,  86804,  G0472,  36415,  36416</b></p>		<p>M02.30,  M02.311,M02.312,M02.319,M02.321,M02.322,  M02.329,M02.331,M02.332,M02.339,  M02.341,M02.342,M02.349,M02.351,M02.352,  M02.359,M02.361,M02.362,M02.369,  M02.371,M02.372,M02.379,M02.38,M02.39,  N18.3,N18.4,</p> <p>N18.5,N18.6,N34.1,N49.1,N49.2,N49.3,N49.8,  N49.9,N73.5,N73.9,N76.0,N76.1,N76.2,  N76.3,N77.1,O35.3XX0,O35.3XX1,O35.3XX2,  O35.3XX3,O35.3XX4,O35.3XX5,  O35.3XX9,</p> <p>O35.5XX0,O35.5XX1,O35.5XX2,O35.5XX3,O35.5X  X4,O35.5XX5,O35.5XX9,O90.4,O98.011,  O98.012,O98.013,O98.019,O98.02,O98.03,O98.1  11,O98.112,O98.113,O98.119,O98.12,  O98.13,O98.211,O98.212,O98.213,O98.219,O98.  22,O98.23,O98.311,O98.312,O98.313,  O98.319,O98.32,O98.33,O99.320,O99.321,O99.3  22,O99.323,O99.324,  O99.325,P00.2, Z00.00,Z00.01,  Z04.41,Z04.42,Z11.3,Z11.4,Z11.59,Z11.9</p> <p>Z14.01,Z14.02,Z20.2,Z20.5,Z20.6,Z20.828,Z21,  Z22.4,Z41.8,Z48.21,Z48.22,  Z48.24,Z48.280,Z48.288,Z48.290,Z48.298,Z49.31,  Z49.32,Z51.89,Z52.000,  Z52.001,Z52.008,Z52.010,Z52.011,Z52.018,Z52.09  0,Z52.091,Z52.098,  Z52.10,Z52.11,Z52.19,Z52.20,Z52.21,Z52.29,Z52.3  ,Z52.4,Z52.5,Z52.6,Z52.89, Z52.9,  Z57.8,Z71.7,Z72.51,Z72.52,Z72.53,  Z79.899,Z86.2,Z92.25,Z94.0,  Z94.1,Z94.2,Z94.3,Z94.5,Z94.6,Z94.7,  Z94.81,Z94.82,Z94.83,Z94.84,Z94.89,  Z94.9,Z95.3,Z95.4,Z99.2</p> <p><b>*This benefit can be billed also with any  ICD10 preventive diagnosis listing on  page 33.</b></p>
<p>100TPA8051916</p>			<p>22   Page</p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>HIV screening — Strongly recommends that clinicians screen for human immunodeficiency virus (HIV) for everyone ages 15-65, and other ages at increased risk for HIV infection</p>	<p><b>87534-87539, G0432-G0435, 86689, 86701-86703, G0432-G0435, S3645, 36415, 36416</b></p>	<p><b>V02.9, V70.0, V73.89, V74.5, V75.9, V22.0 –V23.9, V91.00- V91.99</b></p>	<p><b>Z22.6, Z22.8, Z22.9, Z00.00, Z00.01, Z00.8, Z11.3, Z11.4, Z11.59, Z11.9, Z20.6, Z34.00-Z34.03, Z34.80-Z34.83, Z34.90-Z34.93, Z33.1, O09.00-O09.03, O09.10-O09.13, O09.291, O09.40-O09.43, O09.211-O09.213, O09.219, O09.10-O09.13, O09.291-O09.299, O09.30-O09.33, O09.511-O09.513, O09.519, O09.521-O09.523, O09.611-O09.613, O09.619, O09.61-O09.623, O09.629, O09.811-O09.813, O09.819-O09.823, O09.829, O36.80X0-O36.80X79, O09.70-O09.73, O09.891-O09.899, O09.90-O09.93, O30.001-O30.013, O30.019, O30.031-O30.033, O30.039, O30.041-O30.043, O30.049, O30.091-O30.099, O30.101-O30.103, O30.109, O30.111-O30.119, O30.121-O30.123, O30.129, O30.191-O30.193, O30.199, O30.201-O30.203, O30.209, O30.211-O30.213, O30.219, O30.221-O30.223, O30.291-O30.293, O30.299, O030.801-O30.803, O30.809, O30.811-O30.813, O30.819, O30.821-O30.823, O30.829, O30.891-O30.899</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>

<p>Human papillomavirus testing The USPSTF recommends screening for high-risk human papillomavirus DNA testing in women with normal cytology results. Screening should begin at 30 years of age and should occur no more frequently than every 3 years.</p>	<p><b>87623-87625</b></p>	<p><b>V70.0, V70.9, V72.31, V73.81, V76.2</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z01.411, Z01.419, Z11.51, Z12.4</b></p>
<p>Hypothyroidism screening: newborns The USPSTF recommends screening for congenital hypothyroidism in newborns.</p>	<p><b>84443, 84437</b></p>	<p><b>V20.31, V20.32, V77.0</b></p>	<p><b>Z00.110, Z00.111, Z13.29</b></p>
<p>Interpersonal and domestic violence screening and counseling The USPSTF recommends screening and counseling for interpersonal and domestic violence. Coverage for PCP, LPC and LSW.</p>	<p><b>90791-90792</b></p>	<p><b>V61.11, V61.12, V62.81, V62.89</b></p>	<p><b>R41.83, Z60.0, Z60.8, Z60.9, Z64.4, Z65.4, Z65.8, Z69.11, Z69.12, Z73.6</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Iron Supplementation in children The USPSTF recommends routine iron supplementation for asymptomatic children aged 6 to 12 months who are at increased risk for iron deficiency anemia.</p>	<p><b>99070</b></p>	<p><b>280.0, 280.1, 280.8, 269.3</b></p>	<p><b>D50.0, D50.8, D50.9, E61.1</b></p>
<p>Lung cancer screening. USPSTF recommends annual screening for lung cancer with low-dose computed tomography in adults ages 55 to 80 years who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years.</p>	<p><b>S8032</b></p>	<p><b>305.1, 909.1, 989.84, V15.82</b></p>	<p><b>F17.210, F17.211, F17.213, F17.218, F417.219, Z87.891</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

<b>Preventive Service:</b>	<b>CPT Code(s):</b>	<b>ICD9 Diagnosis Code(s)</b>	<b>ICD10 Diagnosis Code(s)</b>
<p>Obesity screening and counseling: adults The USPSTF recommends that clinicians screen all adult patients for obesity and offer intensive counseling and behavioral interventions to promote sustained weight loss for obese adults.</p>	<b>99401-99404</b>	<b>V77.8</b>	<b>Z13.89</b>
<p>Obesity screening and counseling: children The USPSTF recommends that clinicians screen children aged 6 years and older and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.</p>	<b>99401-99404</b>	<b>V77.8</b>	<b>Z13.89</b>
<p>Osteoporosis screening for women age 50 years and older. Frequency is every two years.</p>	<p><b>76977, 77078, 77080, 77081, G0130</b></p> <p><b>Revenue Codes- 0320-0329</b></p>	<b>V17.81, V70.0, V82.81</b>	<b>Z00.00, Z00.01, Z00.8, Z13.820, Z82.62</b>

## Preferred Administrators Preventive Services FY 2015/2016

<b>Preventive Service:</b>	<b>CPT Code(s):</b>	<b>ICD9 Diagnosis Code(s)</b>	<b>ICD10 Diagnosis Code(s)</b>
<p>Preventive Annual/ Physical Exams for Male/Female: Age Group- 0-1 year (The frequency of visits are 3-5 days, 1 month, 2 months, 4 months, 6 months, and 9 months)</p> <p>*After 1 year of age, exams are only covered one per Fiscal Year</p>	<b>99381, 99391</b>	<b>V20.1, V20.2, V20.31, V20.32</b>	<b>Z76.2, Z00.121, Z00.129, Z00.110, Z00.111</b>
<p>Preventive Annual/ Physical Exams for Male/Female: Age Group- 1-4 years</p> <p>* After 1 year of age, exams are only covered one per Fiscal Year</p>	<b>99382, 99392</b>	<b>V20.1, V20.2</b>	<b>Z76.2, Z00.121 Z00.129</b>
<p>Preventive Annual/ Physical Exams for Male/Female: Age Group- 5-11 years * After 1 year of age, exams are only covered one per Fiscal Year</p>	<b>99383, 99393</b>	<b>V20.1, V20.2</b>	<b>Z76.2, Z00.121 Z00.129</b>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
Preventive Annual/ Physical Exams for Male/Female: Age Group- 12-17 years * After 1 year of age, exams are only covered one per Fiscal Year	<b>99384, 99394</b>	<b>V20.1, V20.2</b>	<b>Z76.2, Z00.121 Z00.129</b>
Routine Immunizations and Administration of Vaccines for Children and Adult  <b>*The following CPT codes have been discontinued effective January 1, 2016</b> <b>90645, 90646, 90669, 90692, 90693, 90703, 90704, 90705, 90706, 90708, 90712, 90719, 90720, 90721, 90725, 90727, 90735</b>	<b>*Administration Codes- 90460, 90461, 90471, 90474, 90472, 90473</b>  <b>Admin Revenue Code- 0771</b>  <b>Vaccines Codes- 90476 - 90648, 90649-90651, 90653 - 90736, 90738 – 90749</b>  <b>Vaccine Revenue Code-0636</b>	<b>V03.0 - V06.9, V20.1, V20.2, V20.31, V70.0, V70.9</b>	<b>Z76.2, Z23, Z00.129, Z00.121, Z00.110, Z00.00, Z00.01, Z00.8</b>

**\*After 1 year of age, exams are covered one per Plan Year**

Comprehensive preventive medicine evaluation and management of an individual includes:

- An age and gender-appropriate history
- Physical examination
- Counseling/anticipatory guidance
- Risk factor reduction interventions
- The ordering of appropriate immunization(s) and laboratory/ screening procedures
- Routine hearing and vision exams are covered at 100% for children from birth up to five years of age. **For children over 5 years, the hearing and vision exams are covered as medical and applicable deductibles or co-insurance will apply.**

## Preferred Administrators Preventive Services FY 2015/2016

<b>Preventive Service:</b>	<b>CPT Code(s):</b>	<b>ICD9 Diagnosis Code(s)</b>	<b>ICD10 Diagnosis Code(s)</b>
Preventive Annual Physical Exams for Male/Female: Age Group- 18- 39 age This would include Well Adult Visit (Physicals)  <b>(One per Fiscal Year)</b>	<b>99385, 99395</b>	<b>V70.0, V70.9</b>	<b>Z00.00, Z00.01, Z00.8</b>
Preventive Annual Physical Exams for Male/Female: Age Group- 40- 64 age This would include Well Adult Visit (Physicals)  <b>(One per Fiscal Year)</b>	<b>99386-99396</b>	<b>V70.0, V70.9</b>	<b>Z00.00, Z00.01, Z00.8</b>
Preventive Annual Physical Exams for Male/Female: Age Group- 65- older This would include Well Adult Visit (Physicals)  <b>(One per Fiscal Year)</b>	<b>99387-99397</b>	<b>V70.0, V70.9</b>	<b>Z00.00, Z00.01, Z00.8</b>
Preventive Well Women Annual Visits with OB/GYN <b>(One per Fiscal Year)</b>	<b>99384-99387, 99394-99397</b>	<b>V72.3, V72.31, V72.32, V76.2</b>	<b>Z01.411, Z01.419, Z01.42, Z12.4</b>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Rh incompatibility screening: first pregnancy visit The USPSTF strongly recommends Rd (D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care.</p>	<p><b>86901</b></p>	<p><b>V22.0, V22.1, V22.2, V23.89, V28.5, V72.31, V78.9</b></p>	<p><b>O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z01.411, Z01.419, Z13.0, 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, Z36</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>
<p>Rh incompatibility screening: 24-28 weeks gestation The USPSTF 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.</p>	<p><b>86901</b></p>	<p><b>V22.0, V22.1, V22.2, V23.89, V28.5, V72.31, V78.9</b></p>	<p><b>O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z01.411, Z01.419, Z13.0, 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, Z36</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>STIs counseling The USPSTF recommends high-intensity behavioral counseling to prevent sexually transmitted infections (STIs) for all sexually active adolescents and for adults at increased risk for STIs.</p>	<p><b>99401-99404</b></p>	<p><b>V65.45, V70.0, V70.9</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z71.89</b></p>
<p>Syphilis screening: non-pregnant adults The USPSTF strongly recommends that clinicians screen persons at increased risk for syphilis infection.</p>	<p><b>86592-86593</b></p>	<p><b>V70.0, V70.9, V72.31, V74.5, V75.9</b></p>	<p><b>Z00.00, Z00.01, Z00.8, Z01.411, Z01.419, Z11.3, Z11.9</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>
<p>Syphilis screening: pregnant women The USPSTF recommends that clinicians screen all pregnant women for syphilis infection.</p>	<p><b>86592-86593</b></p>	<p><b>V22.0, V22.1, V22.2, V23.89, V70.0, V70.9, V72.31, V74.5, V75.9</b></p>	<p><b>O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z00.8, Z01.411, Z01.419, Z11.3, Z11.9, 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</b></p> <p><b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b></p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
<p>Tobacco use counseling: non-pregnant adults The USPSTF recommends that clinicians ask all adults about tobacco use and provide tobacco cessation interventions for those who use tobacco products.</p>	<p><b>99406-99407</b></p>	<p><b>V70.0, V70.9</b></p>	<p><b>Z00.00, Z00.01, Z00.8</b> *This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</p>
<p>Tobacco use counseling: pregnant women The USPSTF recommends that clinicians ask all pregnant women about tobacco use and provide augmented, pregnancy-tailored counseling to those who smoke.</p>	<p><b>99406-99407</b></p>	<p><b>V22.0, V22.1, V22.2, V23.89, V70.0, V70.9</b></p>	<p><b>O09.70, O09.71, O09.72, O09.73, O09.891, O09.892, O09.893, O09.899, Z00.8, 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</b>  *This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</p>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
Urinary tract or other infection screening: pregnant women.	<b>81000-81099</b>	ICD9 646.60-646.64, V22.0-V23.9, V91.00-V91.99	<b>O23.00-O23.40, O23.519-O23.90, O23.01-O23.23-O23.31-O23.33, O23.41-O23.43, O23.41-O23.43, O23.511-O23.513, O23.251-O23.523, O23.591-O23.593, O23.91-O23.93, 086.11-086.29</b>  <b>*This benefit can be billed also with any ICD10 preventive diagnosis listing on page 33.</b>

## Preferred Administrators Preventive Services FY 2015/2016

Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s)
Visual acuity screening in children The USPSTF recommends screening to detect amblyopia, strabismus, and defects in visual acuity in children younger than age 5 years.	<b>99173</b>	<b>V20.2, V20.31, V72.0</b>	<b>Z00.110, Z00.121, Z00.129, Z01.00, Z01.01</b>

Preferred Administrators Preventive Services  
FY 2015/2016

**ICD10 Pregnancy List**

**Pregnancy List**

Z34.00-Z34.83, Z34.90-Z34.93, Z33.1, O09.00-O09.13, O09.291, O09.40-O009.43, O09.211-O09.219, O09.10-O09.13, O09.291-O09.293, O09.299, O09.30-O09.33, O09.511-O09.513, O09.519, O09.521-O09.523, O09.529, O09.611-O09.613, O09.619, O09.61-O09.623, O09.629, O09.811-O09.813, O09.819-O09.823, O09.829, O36.80X0-O36.80X9, O09.70-O09.73, O09.891-O09.893, O09.899, O09.90-O09.93, O30.001-O30.009, O30.011-O30.013, O30.019, O30.031-O30.033, O30.039, O30.41-O30.043, O30.049, O30.091-O30.093, O30.099, O30.101-O30.109, O30.111-O30.113, O30.119-O30.0123, O30.129, O30.191-O30.193, O30.199, O30.201-O30.203, O30.209, O30.211-O30.219, O30.221-O30.223, O30.299, O30.291-O30.293, O30.299, O30.801-O30.803, O30.811-O30.823, O30.819, O30.821-O30.823, O30.829, O30.891-O30.893, O30.899

# Preferred Administrators Preventive Services FY 2015/2016

## **Indications for Coverage**

### **Introduction:**

Effective for plan years on or after September 23, 2010, the federal Patient Protection and Affordable Care Act (PPACA) requires non-grandfathered health plans to cover certain “recommended preventive services” identified by PPACA under the Preventive Care Services benefit, without cost sharing to enrollees when provided by Network physicians.

### **For Plan Years that on or after September 23, 2010:**

For non-grandfathered health plans, **Preferred Administrators** will cover the recommended preventive services under the Preventive Care Services benefit as mandated by PPACA, with no cost sharing when provided by a Network provider. These services are described in the United States Preventive Services Task Force A and B recommendations, the Advisory Committee on Immunization Practices (ACIP) of the CDC, and Health Resources and Services Administration (HRSA) Guidelines including the American Academy of Pediatrics *Bright Futures* periodicity guidelines.

### **For Plan Years that on or after August 1, 2012:**

For non-grandfathered plans, **Preferred Administrators** will cover for women the additional preventive care and screenings as required by the HHS Health Plan Coverage Guidelines for Women’s Preventive Services for plan years that begin on or after August 1, 2012.

### **\*Note\***

The Public Health Service (PHS) Act and federal regulations also allow plans to use “reasonable medical management” techniques to determine the frequency, method, treatment, or setting for a preventive item or service to the extent it is not specified in a recommendation or guideline.

## **REFERENCES**

1. Grade Definitions for USPSTF Recommendations  
<http://www.uspreventiveservicestaskforce.org/Page/Name/grade-definitions#brec2>
2. Women’s Preventive Services: Required Health Plan Coverage Guidelines:  
<http://www.hrsa.gov/womensguidelines/>
3. Department of Labor: [http://www.dol.gov/ebsa/consumer\\_info\\_health.html](http://www.dol.gov/ebsa/consumer_info_health.html)
4. July 19, 2010 IRS Interim Rules: [http://www.irs.gov/irb/2010-29\\_IRB/index.html](http://www.irs.gov/irb/2010-29_IRB/index.html)
5. American Academy of Pediatrics / Bright Futures / Recommendations for Pediatric Preventive Healthcare. (For ages 0 – 21): [http://www.aap.org/en-us/professional-resources/practice-support/Periodicity/Periodicity%20Schedule\\_FINAL.pdf](http://www.aap.org/en-us/professional-resources/practice-support/Periodicity/Periodicity%20Schedule_FINAL.pdf)
6. American Academy of Pediatrics: <http://www.aap.org/> Centers for Disease Control and Prevention / Immunization Schedules: <http://www.cdc.gov/vaccines/schedules/index.html>
7. American Academy of Family Physicians (AAFP) Summary of Recommendations for Clinical Preventive Services: [http://www.aafp.org/dam/AAFP/documents/patient\\_care/clinical\\_recommendations/cps-recommendations.pdf](http://www.aafp.org/dam/AAFP/documents/patient_care/clinical_recommendations/cps-recommendations.pdf)

## Preferred Administrators Preventive Services FY 2015/2016

### GUIDELINE HISTORY/REVISION HISTORY

This Preventive Listing will be updated accordingly to AMA/CPT updates. All updates will be posted at [www.preferredadmin.net](http://www.preferredadmin.net) . For a complete listing of benefits, you can review all Plan Documents and Summary of Benefits at [www.preferredadmin.net](http://www.preferredadmin.net) . For verification of eligibility and benefits, you can reach our Member Services Department at 915-532-3778 or 1-877-532-3778 if outside of the calling area. Member Services is available Monday through Friday from 7 a.m. to 5 p.m., Mountain Time.

<b>10/2010</b>	<b>Original Effective Date</b>
<b>9/17/2015</b>	<b>Reviewed and updated list.</b>
<b>12/3/15</b>	<b>Added Code G0464 under Colorectal cancer screening.</b>
<b>1/11/16</b>	<b>The following CPT codes have been discontinued effective January 1, 2016 90645, 90646, 90669, 90692, 90693, 90703, 90704, 90705, 90706, 90708, 90712, 90719, 90720, 90721, 90725, 90727, 90735, J7302.</b>
<b>1/11/16</b>	<b>Code J7302 has been replaced with codes J7297 and J7298.</b>
<b>3/1/16</b>	<b>Added Code 96110, effective date is 10/1/15. Developmental screening is covered as a preventive screening for children 0- 3 years of age.</b>
<b>3/1/16</b>	<b>Added Codes G0204, 77063, and G0279 to the Breast cancer screening. Codes are effective 10/1/15.</b>