<table>
<thead>
<tr>
<th>Topic</th>
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<tbody>
<tr>
<td>Abdominal aortic aneurysm</td>
<td>The USPSTF recommends one-time screening for abdominal aortic aneurysm by ultrasonography in men aged 65 to 75 who have ever smoked.</td>
<td>B</td>
<td>Add benefit. CPT 76770, 76775, G0389 must be covered</td>
</tr>
<tr>
<td>screening: men</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Alcohol misuse counseling</td>
<td>The USPSTF recommends screening and behavioral counseling interventions to reduce alcohol misuse by adults, including pregnant women, in primary care settings.</td>
<td>B</td>
<td>Add benefit. CPT 99408 and 99409 must be covered</td>
</tr>
<tr>
<td>Anemia screening: pregnant</td>
<td>The USPSTF recommends routine screening for iron deficiency anemia in asymptomatic pregnant women.</td>
<td>B</td>
<td>Add benefit CPT 85004-85041 must be covered</td>
</tr>
<tr>
<td>women</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Aspirin to prevent CVD: men</td>
<td>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.</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>Aspirin to prevent CVD: women</td>
<td>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.</td>
<td>A</td>
<td>This item has been referred to Legal for consideration</td>
</tr>
<tr>
<td>Bacteriuria screening:</td>
<td>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.</td>
<td>A</td>
<td>Add benefit. CPT 87081-87088 must be covered</td>
</tr>
<tr>
<td>pregnant women</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood pressure screening</td>
<td>The USPSTF recommends screening for high blood pressure in adults aged 18 and older.</td>
<td>A</td>
<td>Covered under routine physical provision “PXO”</td>
</tr>
<tr>
<td>BRCA screening, counseling</td>
<td>The USPSTF recommends that women whose family history is associated with an increased risk for deleterious mutations in BRCA1 or BRCA2 genes be referred for genetic counseling and evaluation for BRCA testing.</td>
<td>B</td>
<td>Add benefit. CPT S3820, S3822, S3823 must be covered.</td>
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<tr>
<td>Breast cancer preventive medication</td>
<td>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.</td>
<td>B</td>
<td>Office visit covered under routine physical provision &quot;PXO&quot;, &quot;WVIS&quot;, &quot;PXR&quot; or &quot;RMAM&quot;. The guideline also may reference chemo prevention (oral prescription drugs). Does the med fall under regular RX benefit or PPACA? Legal review pending.</td>
</tr>
<tr>
<td>Breast cancer screening</td>
<td>The USPSTF recommends screening mammography for women, with or without clinical breast examination, every 1-2 years for women aged 40 and older.</td>
<td>B</td>
<td>Covered under routine physical &quot;PXO&quot;, &quot;WVIS&quot;, &quot;PXR&quot; or &quot;RMAM&quot;</td>
</tr>
<tr>
<td>Breastfeeding counseling</td>
<td>The USPSTF recommends interventions during pregnancy and after birth to promote and support breastfeeding.</td>
<td>B</td>
<td>Covered under routine physical 'PXO&quot;, or &quot;DMGO&quot;</td>
</tr>
<tr>
<td>Cervical cancer screening</td>
<td>The USPSTF strongly recommends screening for cervical cancer in women who have been sexually active and have a cervix.</td>
<td>A</td>
<td>Covered under routine pap smear &quot;RPAP&quot;, &quot;WVIS&quot;, &quot;PXR&quot; or &quot;PXO&quot;</td>
</tr>
<tr>
<td>Chlamydial infection screening: non-pregnant women</td>
<td>The USPSTF recommends screening for chlamydial infection for all sexually active non-pregnant young women aged 24 and younger and for older non-pregnant women who are at increased risk.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Chlamydial infection screening: pregnant women</td>
<td>The USPSTF recommends screening for chlamydial infection for all pregnant women aged 24 and younger and for older pregnant women who are at increased risk.</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Cholesterol abnormalities screening: men 35 and older</td>
<td>The USPSTF strongly recommends screening men aged 35 and older for lipid disorders.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Cholesterol abnormalities screening: men younger than 35</td>
<td>The USPSTF recommends screening men aged 20 to 35 for lipid disorders if they are at increased risk for coronary heart disease.</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Cholesterol abnormalities screening: women 45 and older</td>
<td>The USPSTF strongly recommends screening women aged 45 and older for lipid disorders if they are at increased risk for coronary heart disease.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Cholesterol abnormalities screening: women younger than 45</td>
<td>The USPSTF recommends screening women aged 20 to 45 for lipid disorders if they are at increased risk for coronary heart disease.</td>
<td>B</td>
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## USPSTF Grade A B Recommendations (continued)

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<tr>
<td>Colorectal cancer screening</td>
<td>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.</td>
<td>A</td>
<td>Covered under routine colonoscopy &quot;RCCS&quot;, &quot;RCLA&quot;, &quot;PRRC&quot;, &quot;DRE&quot; or &quot;PRVC&quot; 82274 (colorectal neoplasm screening) procedure should be added for all states (Currently covered for OK only)</td>
</tr>
<tr>
<td>Dental caries chemoprevention: preschool children</td>
<td>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.</td>
<td>B</td>
<td>This item has been referred to Legal for consideration</td>
</tr>
<tr>
<td>Depression screening: adolescents</td>
<td>The USPSTF recommends screening of adolescents (12-18 years of age) for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy (cognitive-behavioral or interpersonal), and follow-up.</td>
<td>B</td>
<td>Covered under &quot;DMGO&quot; or &quot;PXO&quot;</td>
</tr>
<tr>
<td>Depression screening: adults</td>
<td>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.</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Diabetes screening</td>
<td>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.</td>
<td>B</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Folic acid supplementation</td>
<td>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 acid.</td>
<td>A</td>
<td>This item has been referred to Legal for consideration</td>
</tr>
<tr>
<td>Gonorrhea prophylactic medication: newborns</td>
<td>The USPSTF strongly recommends prophylactic ocular topical medication for all newborns against gonococcal ophthalmic neonatorum.</td>
<td>A</td>
<td>Covered under inpatient medical</td>
</tr>
<tr>
<td>Gonorrhea screening: women</td>
<td>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).</td>
<td>B</td>
<td>Add benefit, CPT codes to be provided</td>
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<tr>
<td>Healthy diet counseling</td>
<td>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.</td>
<td>B</td>
<td>Covered under &quot;DMGO&quot; or &quot;NMT&quot; for procedures 97802 -97804, S9449 - S9452</td>
</tr>
<tr>
<td>Hearing loss screening: newborns</td>
<td>The USPSTF recommends screening for hearing loss in all newborn infants.</td>
<td>B</td>
<td>Covered under inpatient medical</td>
</tr>
<tr>
<td>Hemoglobinopathies screening: newborns</td>
<td>The USPSTF recommends screening for sickle cell disease in newborns.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Hepatitis B screening: pregnant women</td>
<td>The USPSTF strongly recommends screening for hepatitis B virus infection in pregnant women at their first prenatal visit.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>HIV screening</td>
<td>The USPSTF strongly recommends that clinicians screen for human immunodeficiency virus (HIV) all adolescents and adults at increased risk for HIV infection.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Hypothyroidism screening: newborns</td>
<td>The USPSTF recommends screening for congenital hypothyroidism in newborns.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Iron supplementation in children</td>
<td>The USPSTF recommends routine iron supplementation for asymptomatic children aged 6 to 12 months who are at increased risk for iron deficiency anemia.</td>
<td>B</td>
<td>This item has been referred to Legal for consideration</td>
</tr>
<tr>
<td>Obesity screening and counseling: adults</td>
<td>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.</td>
<td>B</td>
<td>Covered under &quot;DMGO&quot;, &quot;NMT&quot;, &quot;PXO&quot; or &quot;WBCO&quot;</td>
</tr>
<tr>
<td>Obesity screening and counseling: children</td>
<td>The USPSTF recommends that clinicians screen children aged 6 years and older for obesity and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>Osteoporosis screening: women</td>
<td>The USPSTF recommends that women aged 65 and older be screened routinely for osteoporosis. The USPSTF recommends that routine screening begin at age 60 for women at increased risk for osteoporotic fractures.</td>
<td>B</td>
<td>Covered under &quot;RBOD&quot; or &quot;PXO&quot;</td>
</tr>
<tr>
<td>PKU screening: newborns</td>
<td>The USPSTF recommends screening for phenylketonuria (PKU) in newborns.</td>
<td>A</td>
<td>Covered under inpatient medical</td>
</tr>
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<tr>
<td>Rh incompatibility screening: first pregnancy visit</td>
<td>The USPSTF strongly recommends Rh (D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Rh incompatibility screening: 24-28 weeks gestation</td>
<td>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.</td>
<td>B</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>STIs counseling</td>
<td>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.</td>
<td>B</td>
<td>Covered under &quot;DMGO&quot;, &quot;NMT&quot;, &quot;PXO&quot;</td>
</tr>
<tr>
<td>Tobacco use counseling: non-pregnant adults</td>
<td>The USPSTF recommends that clinicians ask all adults about tobacco use and provide tobacco cessation interventions for those who use tobacco products.</td>
<td>A</td>
<td>Covered under &quot;SMOK&quot;</td>
</tr>
<tr>
<td>Tobacco use counseling: pregnant women</td>
<td>The USPSTF recommends that clinicians ask all pregnant women about tobacco use and provide augmented, pregnancy-tailored counseling to those who smoke.</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>Syphilis screening: non-pregnant persons</td>
<td>The USPSTF strongly recommends that clinicians screen persons at increased risk for syphilis infection.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Syphilis screening: pregnant women</td>
<td>The USPSTF recommends that clinicians screen all pregnant women for syphilis infection.</td>
<td>A</td>
<td>Add benefit, CPT codes to be provided</td>
</tr>
<tr>
<td>Visual acuity screening in children</td>
<td>The USPSTF recommends screening to detect amblyopia, strabismus, and defects in visual acuity in children younger than age 5 years.</td>
<td>B</td>
<td>Covered under &quot;WBCO&quot;</td>
</tr>
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