01-99385-03

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Subject: Preventive Services

THIS MEDICAL COVERAGE GUIDELINE IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS MEDICAL COVERAGE GUIDELINE APPLIES TO ALL LINES OF BUSINESS UNLESS OTHERWISE NOTED IN THE PROGRAM EXCEPTIONS SECTION.

Position Statement	Billing/Coding	Reimbursement	Program Exceptions	Definitions	Related Guidelines
Other	References	Updates			

DESCRIPTION:

Preventive services include a broad range of services. Florida Blue follows the recommendations from the following national organizations:

- U.S. Preventive Services Task Force (USPSTF) preventive services that have a rating of A or B
- Advisory Committee on Immunization Practices (ACIP)
- Health Resources and Services Administration (HRSA)
- And such other appropriate nationally recognized public and private organizations as may be determined solely by Florida Blue from time to time.

POSITION STATEMENT:

Note: Coverage for preventive services (including screening, prevention, counseling and immunizations/vaccines) is subject to the member's benefit terms, limitations and maximums. Refer to member's contract language regarding preventive services.

Note: Coverage may be governed by state or federal mandates.

Preventive services may be covered under the member's contract benefits. Preventive services include, but are not limited to (screening, prevention, counseling and immunizations/vaccines).

Preventive services are covered according to the member's contract benefits.

Screening services are covered according to the member's contract benefits.

Immunization/vaccines are covered according to the member's contract benefits.

The following preventive services have a rating of A or B from the U.S. Preventive Services Task Force (USPSTF).

Service	Description
Abdominal aortic aneurysm screening	The USPSTF recommends 1-time screening for abdominal aortic aneurysm (AAA) with ultrasonography in men aged 65 to 75 years who have ever smoked. Grade: B
Anxiety in children and adolescents: screening	The USPSTF recommends screening for anxiety in children and adolescents aged 8 to 18 years. Grade: B
Anxiety disorders in adults: screening	The USPSTF recommends screening for anxiety disorders in adults, including pregnant and postpartum persons. Grade: B
Bacteriuria screening	The USPSTF recommends screening for asymptomatic bacteriuria using urine culture in pregnant persons. Grade: B
BRCA-related cancer: risk assessment, genetic counseling,and genetic testing	The USPSTF recommends that 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 (BRCA 1/2) 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. Grade: B
Breast cancer: medication to reduce risk	The USPSTF recommends that 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. Grade: B
Breast cancer screening	The USPSTF recommends biennial screening mammography for women aged 40-74 years. Grade: B
Breastfeeding: primary care interventions	The USPSTF recommends providing interventions or referrals during pregnancy and after birth to promote and support breastfeeding. Grade: B

Cervical cancer screening	The USPSTF recommends screening for cervical cancer every 3 years with cervical cytology alone in women aged 21 to 29 years. For women aged 30 to 65 years, the USPSTF recommends screening every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone, or every 5 years with hrHPV testing in combination with cytology (cotesting). Grade: A
Chlamydia screening	The USPSTF recommends screening for chlamydia in all sexually active women age 24 years or younger and in women 25 years or older who are at increased risk for infection. Grade: B
Colorectal cancer screening	The USPSTF recommends screening for colorectal cancer in adults aged 45 to 49 years. Grade: B The USPSTF recommends screening for colorectal cancer in all adults aged 50 to 75 years. Grade: A
Dental caries prevention	The USPSTF recommends that primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption. The USPSTF recommends primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluroide. Grade: B
Depression and suicide screening: children and adolescents	The USPSTF recommends screening for major depressive disorder (MDD) in adolescents aged 12 to 18 years. Grade: B
Depression screening: adults	The USPSTF recommends screening for depression in the adult population, including pregnant and postpartum persons as well as older adults. Grade: B

Diabetes screening	The USPSTF recommends screening for abnormal blood glucose as part of cardiovascular risk assessment in adults aged 40 to 70 years who are overweight or obese. Clinicians should offer or refer patients with abnormal blood glucose to intensive behavioral counseling interventions to promote a healthful diet and physical activity. Grade: B
Falls prevention: older adults	The USPSTF recommends exercise interventions to prevent falls in community-dwelling adults 65 years or older who are at increased risk for falls. Grade: B
Folic acid supplementation	The USPSTF recommends that all persons planning to or who could become pregnant take a daily supplement containing 0.4 to 0.8 mg (400 to 800 µg) of folic acid. Grade: A
Gestational diabetes screening	The USPSTF recommends screening for gestational diabetes in asymptomatic pregnantpersons after 24 weeks of gestation or after. Grade: B
Gonorrhea prophylactic medication: newborns	The USPSTF recommends prophylactic ocular topical medication for all newborns to prevent gonococcal ophthalmia neonatorum. Grade: A
Gonorrhea screening	The USPSTF recommends screening for gonorrhea in all sexually active women age 24 years or younger and in women 25 years or older who are at increased risk for infection. Grade: B
Healthy diet and physical activity for cardiovascular disease: behavioral counseling interventions	The USPSTF recommends offering or referring adults with cardiovascular disease risk factors to behavioral counseling interventions to promote a healthy diet and physical activity. Grade: B
Hearing loss screening: newborns	The USPSTF recommends screening for hearing loss in all newborn infants. Grade: B
Hemoglobinopathies screening: newborns	The USPSTF recommends screening for sickle cell disease in newborns. Grade: A

Hepatitis B screening: pregnant women	The USPSTF recommends screening for hepatitis B virus (HBV) infection in pregnant women at their first prenatal visit. Grade: A
Hepatitis B screening: adolescents and adults	The USPSTF recommends screening for hepatitis B virus (HBV) infection in adolescents and adults at increased risk for infection. Grade: B
Hepatitis C virus infection in adolescents and adults screening	The USPSTF recommends screening for hepatitis C virus (HCV) infection in adults aged 18 to 79 years. Grade: B
High body mass index in children and adolescents	The USPSTF recommends that clinicians provide or refer children and adolescents 6 years or older with a high body mass index (BMI) (≥ 95th percentile for age and sex) to comprehensive, intensive behavioral interventions. Grade B
Human Immunodeficiency Virus (HIV) screening: adolescents and adults	The USPSTF recommends that 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. Grade: A
Human Immunodeficiency Virus (HIV) screening: pregnant persons	The USPSTF recommends that clinicians screen for HIV infection in all pregnant persons, including those who present in labor or at delivery whose HIV status is unknown. Grade: A
Hypertension screening: adults	The USPSTF recommends screening for hypertension in adults 18 years or older with office blood pressure measurement (OBPM). The USPSTF recommends obtaining blood pressure measurements outside of the clinical setting for diagnostic confirmation before starting treatment. Grade A
Hypertension screening: asymptomatic pregnant persons	The USPSTF recommends screening for hypertensive disorders in pregnant persons with blood pressure measurements throughout pregnancy. Grade: B
Hypothyrodism screening:congenital	The USPSTF recommends screening for congenital hypothyroidism in newborns. Grade: A

Intimate partner violence screening: women of reproductive age	The USPSTF recommends that clinicians screen for intimate partner violence in women of reproductive age including those who are pregnant and postpartum. Grade: B
Lung cancer screening	The USPSTF recommends annual screening for lung cancer with low-dose computed tomography in adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years. Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery. Grade: B
Osteoporosis screening: postmenopausal women younger than 65 years	The USPSTF recommends screening for osteoporosis to prevent osteoporotic fractures in postmenopausal women younger than 65 years who are at increased risk for an osteoporotic fracture as estimated by clinical risk assessment. Grade: B
Osteoporosis screening: women 65 years and older	The USPSTF recommends screening for osteoporosis to prevent osteoporotic fractures in women 65 years or older. Grade: B
Phenylketonuria screening:newborns	The USPSTF recommends screening for phenylketonuria in newborns. Grade: B
Prediabetes and type 2 diabetes: screening	The USPSTF recommends screening for prediabetes and type 2 diabetes in adults aged 35 to 70 years who have overweight or obesity. Clinicians should offer or refer patients with prediabetes to effective preventive interventions. Grade: B
Preeclampsia: preventive medication	The USPSTF recommends the use of low-dose aspirin (81 mg/day) as preventive medication after 12 weeks of gestation in persons who are at high risk for preeclampsia. Grade: B
Preeclampsia: screening	The USPSTF recommends screening for preeclampsia in pregnant women with blood pressure measurements throughout pregnancy. Grade: B

Prevention of Acquisition of Human Immunodeficiency Virus (HIV): Preexposure Prophylaxis	The USPSTF recommends that clinicians prescribe preexposure prophylaxis using effective antiretroviral therapy to persons who are at increased risk of HIV acquisition to decrease the risk of acquiring HIV. Grade: A
Perinatal depression: counseling and interventions	The USPSTF recommends that clinicians provide or refer pregnant and postpartum persons who are at increased risk of perinatal depression to counseling interventions. Grade: B
Rh (D) incompatibility screening: pregnant women, first pregnancy visit	The USPSTF strongly recommends Rh (D) blood typing and antibody testing for all pregnant women during their first visit for pregnancy-related care. Grade: A
Rh (D) incompatibility screening	The USPSTF recommends repeated Rh (D) antibody testing for all unsensitized Rh (D)-negative women at 24 to 28 weeks' gestation, unless the biological father is known to be Rh (D)-negative. Grade: B
Sexually transmitted infections counseling	The USPSTF recommends intensive behavioral counseling for all sexually active adolescents and for adults who are at increased risk for sexually transmitted infections (STIs). Grade: B
Skin cancer prevention: behavioral counseling	The USPSTF recommends counseling young adults, adolescents, children, and parents of young children about minimizing exposure to ultraviolet (UV) radiation for persons aged 6 months to 24 years with fair skin types to reduce their risk of skin cancer. Grade: B
Statin use for primary prevention of cardiovascular disease in adults: preventive medication	The USPSTF recommends that clinicians prescribe a statin for the primary prevention of CVD for adults aged 40 to 75 years who have 1 or more CVD risk factors (i.e., dyslipidemia, diabetes, hypertension, or smoking) and an estimated 10-year risk of a cardiovascular event of 10% or greater. Grade: B
Syphilis screening: non-pregnant adolescents and adults	The USPSTF recommends screening for syphilis infection in persons who are at increased risk for infection. Grade: A

Syphilis screening: pregnant women	The USPSTF recommends early, universal screening for syphilis infection during pregnancy; if an individual is not screened early in pregnancy, the USPSTF recommends screening at the first available opportunity. Grade: A
Tobacco smoking cessation interventions: adults non-pregnant adults	The USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA)–approved pharmacotherapy for cessation to adults who use tobacco. Grade: A
Tobacco smoking cessation interventions: pregnant persons	The USPSTF recommends that clinicians ask all pregnant persons about tobacco use, advise them to stop using tobacco, and provide behavioral interventions for cessation to pregnant persons who use tobacco. Grade: A
Tobacco use primary care interventions: children and adolescents	The USPSTF recommends that primary care clinicians provide interventions, including education or brief counseling, to prevent initiation of tobacco use among school-aged children and adolescents. Grade: B
Tuberculosis screening: adults	The USPSTF recommends screening for latent tuberculosis (LTBI) in populations at increased risk. Grade: B
Unhealthy alcohol use: screening and behavioral counseling interventions	The USPSTF recommends screening for unhealthy alcohol use in primary care settings in adults 18 years or older, including pregnant women, and providing persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce unhealthy alcohol use. Grade: B
Unhealthy drug use: screening	The USPSTF recommends screening by asking questions about unhealthy drug use in adults age 18 years or older. Screening should be implemented when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred. Grade B
Vision screening children	The USPSTF recommends vision screening at least once in all children ages 3 to 5 years to detect amblyopia or its risk factors. Grade: B

Weight loss to prevent obesity-related morbidity and mortality in adults: behavioral interventions	The USPSTF recommends clinicians offer or refer adults with a body mass index of 30 or higher (calculated as weight in kilograms divided by height in meters squared) to intensive, multicomponent behavioral interventions. Grade: B

Appendix A – USPSTF Grade Definitions

Grade	Definition
A	The USPSTF recommends the service. There is high certainty that the net benefit is substantial.
B	The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.

Immunizations

NOTE: Coverage for immunizations/vaccines is subject to the member's benefit terms, limitations and maximums. Refer to member's contract language regarding immunizations/vaccines.

Therapeutic Immunizations (Covered as Medical Care)

Therapeutic vaccines are given when there is exposure or possible exposure to a bacteria or virus. Examples include (but not limited to) a tetanus booster after stepping on a rusty nail or a meningitis vaccine for possible exposure to meningitis, or Rabies vaccine after a bite from an animal with possible Rabies, pneumococcal polysaccharide vaccine for individuals who are at increased risk for pneumococcal disease or its complications, or meningococcal vaccine for college students living in dormitories or residence halls to prevent bacterial meningitis.

Recommended immunization schedules are available at http://www.cdc.gov/vaccines

Childhood and Adolescent Immunizations

Hepatitis B
Rotavirus
Diphtheria, tetanus,and acellular pertussis (DTaP)
Tetanus, diphtheria,and acellular pertussis (Tdap)
Haemophilus influenzae type b (Hib)
Inactivated poliovirus
Measles, mumps, rubella (MMR)
Varicella
Meningococcal
Pneumococcal
Influenza
Hepatitis A
Human papillomavirus (HPV)
COVID-19
Respiratory syncytial virus (RSV)

Adult Immunizations

Hepatitis A
Hepatitis B

Hemophilus influenzae b (Hib)
Human papillomavirus (HPV)
Influenza
Pneumococcal
Measles, mumps, rubella and varicella (MMR)
Respiratory syncytial virus (RSV)
Tetanus, diphtheria, pertussis (TdaP or Td)
Varicella
Meningococcal
Zoster (shingles)
COVID-19

Other Vaccines

Note: Coverage for immunizations/vaccines for travel and pre-exposure is subject to the member's benefit terms, limitations and maximums. Refer to member's contract language regarding immunizations/vaccines.

Cholera
Hepatitis A
Japanese encephalitis
Rabies
Tickborne encephalitis
Typhoid
Yellow fever

Women's Preventive Services Guidelines

NOTE: Coverage for women's preventive services (including screening, prevention, counseling and immunizations/vaccines) is subject to the member's benefit terms, limitations and maximums. Refer to member's contract language regarding preventive services.

Health Resources and Services Administration (Health and Human Service (HHS)) supports the guidelines listed below that address health needs specific to women, Women's Preventive Services Initiative (WPSI).

Service	Guideline
Well woman visits	WPSI recommends that women receive at least one preventive care visit per year beginning in adolescence and continuing across the lifespan to ensure the provision of all recommended preventive services, including preconception and many services necessary for prenatal and interconception care, are obtained. The primary purpose of these visits should be the delivery and coordination of recommended preventive services as determined by age and risk factors. These services may be completed at a single or as part of a series of visits that take place over time to obtain all necessary services depending on a woman's age, health status, reproductive health needs, pregnancy status, and risk factors. Well-women visits also include prepregnancy, prenatal, postpartum and interpregnancy visits.
Screening for diabetes in pregnancy	WPSI recommends screening pregnant women for gestational diabetes mellitus after 24 weeks of gestation (preferably between 24 and 28 weeks of gestation) to

	prevent adverse birth outcomes. WPSI recommends screening pregnant women with risk factors for type 2 diabetes or GDM before 24 weeks of gestation—ideally at the first prenatal visit.
Counseling for sexually transmitted infections (STIs)	WPSI recommends directed behavioral counseling by a health care clinician or other appropriately trained individual for sexually active adolescent and adult women at an increased risk for STIs. WPSI recommends that clinicians review a woman's sexual history and risk factors to help identify those at an increased risk of STIs. Risk factors include, but are not limited to, age younger than 25, a recent history of an STI, a new sex partner, multiple partners, a partner with concurrent partners, a partner with an STI, and a lack of or inconsistent condom use. For adolescents and women not identified as high risk, counseling to reduce the risk of STIs should be considered, as determined by clinical judgment.
Human Immunodeficiency Virus Infection (HIV)	WPSI recommends all adolescent and adult women, ages 15 and older, receive a screening test for HIV at least once during their lifetime. Earlier or additional screening should be based on risk and rescreening annually or more often may be appropriate beginning at age 13 for adolescent and adult women with an increased risk of HIV infection. WPSI recommends risk assessment and prevention education for HIV infection beginning at age 13 and continuing as determined by risk. A screening test for HIV is recommended for all pregnant women upon initiation of prenatal care with rescreening during pregnancy based on risk factors. Rapid HIV testing is recommended for pregnant women who present in active labor with an undocumented HIV status. Screening during pregnancy enables prevention of vertical transmission
Contraception	WPSI recommends that adolescent and adult women have access to the full range of contraceptives and contraceptive care to prevent unintended pregnancies and improve birth outcomes. Contraceptive care includes screening, education, counseling, and provision of contraceptives (including in the immediate postpartum period). Contraceptive care also includes follow-up care (e.g., management, evaluation and changes, including the removal, continuation, and discontinuation of contraceptives). WPSI recommends that the full range of U.S. Food and Drug Administration (FDA)- approved, -granted, or -cleared contraceptives, effective family planning practices, and sterilization procedures be available as part of contraceptive care. The full range of contraceptives includes those currently listed in the FDA's Birth Control Guide: (1) sterilization surgery for women, (2) implantable rods, (3) copper intrauterine devices, (4)

	intrauterine devices with progestin (all durations and doses), (5) injectable contraceptives, (6) oral contraceptives (combined pill), 7) oral contraceptives (progestin only), (8) oral contraceptives (extended or continuous use), (9) the contraceptive patch, (10) vaginal contraceptive rings, (11) diaphragms, (12) contraceptive sponges, (13) cervical caps, (14) condoms, (15) spermicides, (16) emergency contraception (levonorgestrel), and (17) emergency contraception (ulipristal acetate), and any additional contraceptives approved, granted, or cleared by the FDA. Additionally, instruction in fertility awareness-based methods, including the lactation amenorrhea method, although less effective, should be provided for women desiring an alternative method.
Breastfeeding services and supplies	WPSI recommends comprehensive lactation support services (including consultation, counseling, education by clinicians and peer support services and breastfeeding equipment and supplies) during the antenatal, perinatal, and postpartum periods to optimize the successful initiation and maintenance of breastfeeding. Breastfeeding equipment and supplies include, but are not limited to, double electric breast pumps (including pump parts and maintenance) and breast milk storage supplies. Access to double electric pumps should be a priority to optimize breastfeeding and should not be predicated on prior failure of a manual pump. Breastfeeding equipment may also include equipment and supplies as clinically indicated to support dyads with breastfeeding difficulties and those who need additional services.
Screening and counseling for intimate partner and domestic violence	WPSI recommends screening adolescent and adult women for intimate partner and domestic violence, at least annually, and, when needed, providing or referring to intervention services. Intimate partner and domestic violence include physical violence, sexual violence, stalking and psychological aggression (including coercion), reproductive coercion, neglect, and the threat of violence, abuse, or both. Intervention services include, but are not limited to, counseling, education, harm reduction strategies, and appropriate supportive services.
Screening for anxiety	WPSI recommends screening for anxiety in adolescent and adult women, including those who are pregnant or postpartum. Optimal screening intervals are unknown and clinical judgement should be used to determine screening frequency. Given the high prevalence of anxiety disorders, lack of recognition in clinical practice, and multiple problems associated with untreated anxiety, clinicians should consider screening women who have not been recently screened.

Breast cancer screening for average-risk women	WPSI recommends that women at average risk of breast cancer initiate mammography screening no earlier than age 40 years and no later than age 50 years. Screening mammography should occur at least biennially and as frequently as annually. Women may require additional imaging to complete the screening process or to address findings on the initial screening mammography. If additional imaging (e.g., magnetic resonance imaging (MRI), ultrasound, mammography) and pathology evaluation are indicated, these services also are recommended to complete the screening process for malignancies. Screening should continue through at least age 74 years, and age alone should not be the basis for discontinuing screening. Women at increased risk also should undergo periodic mammography screening.
Screening for diabetes after pregnancy	WPSI recommends screening for type 2 diabetes in women with a history of gestational diabetes mellitus (GDM) who are not currently pregnant and who have not previously been diagnosed with type 2 diabetes.. Initial testing should ideally occur within the first year postpartum and can be conducted as early as 4–6 weeks postpartum. Women who were not screened in the first year postpartum or those with a negative initial postpartum screening test result should be screened at least every 3 years for a minimum of 10 years after pregnancy. For those with a positive screening test result in the early postpartum period, testing should be repeated at least 6 months postpartum to confirm the diagnosis of diabetes regardless of the type of initial test (e.g., fasting plasma glucose, hemoglobin A1c, oral glucose tolerance test). Repeat testing is also indicated for women screened with hemoglobin A1c in the first 6 months postpartum regardless of whether the test results are positive or negative because the hemoglobin A1c test is less accurate during the first 6 months postpartum.
Screening for urinary incontinence	WPSI recommends screening women for urinary incontinence annually. Screening should assess whether women experience urinary incontinence and whether it impacts their activities and quality of life. If indicated, facilitating further evaluation and treatment is recommended.
Obesity prevention in midlife women	WPSI recommends counseling midlife women aged 40 to 60 years with normal or overweight body mass index (BMI) (18.5-29.9 kg/m2) to maintain weight or limit weight gain to prevent obesity. Counseling may include individualized discussion of healthy eating and physical activity.

Screening for cervical cancer	WPSI recommends cervical cancer screening for average-risk women aged 21 to 65 years. For women aged 21 to 29 years, the Women's Preventive Services Initiative recommends cervical cancer screening using cervical cytology (Pap test) every 3 years. Cotesting with cytology and human papillomavirus testing is not recommended for women younger than 30 years. Women aged 30 to 65 years should be screened with cytology and human papillomavirus testing every 5 years or cytology alone every 3 years. Women who are at average risk should not be screened more than once every 3 years.
Patient navigation services for breast and cervical cancer screening	WPSI recommends patient navigation services for breast and cervical cancer screening and follow-up, as relevant, to increase utilization of screening recommendations based on an assessment of the patient's needs for navigation services. Patient navigation services involve person-to-person (e.g., in-person, virtual, hybrid models) contact with the patient. Components of patient navigation services should be individualized. Services include, but are not limited to, person-centered assessment and planning, health care access and health system navigation, referrals to appropriate support services (e.g., language translation, transportation, and social services), and patient education.

Contraception mobile application

Note: Coverage may be governed by state or federal mandates.

FDA approved mobile application (app) for contraception (e.g., Natural Cycles) is covered per member's contract benefit.

- Members will have to file a manual claim to receive reimbursement for their subscription to Natural Cycles
- Effective 01/01/2024, one annual subscription to Natural Cycles will be covered per benefit period. No additional supplies or services are covered
- Members must download and complete the Member Medical Claim form and submit the following documentation with the claim:
    - The Natural Cycles annual subscription receipt. Write the CPT code 99199 and diagnosis code Z30.8 on the receipt
    - A prescription from an in-network provider that includes the name of the mobile application, Natural Cycles.

Code A9293 may be used for contraception mobile application.

Pediatric Preventive Services

NOTE: Coverage for pediatric preventive services (including screening, prevention, counseling and immunizations/vaccines) is subject to the member's benefit terms, limitations and maximums. Refer to member's contract language regarding preventive services.

Recommendations for preventive pediatric health care screenings and assessments (e.g., history, measurements, sensory screening, developmental screening, developmental/behavioral health, physical

examination procedures, oral health, anticipatory guidance) by the American Academy of Pediatrics and Bright Futures is available at https://www.aap.org/en-us/documents/periodicity_schedule.pdf.

BILLING/CODING INFORMATION:

REIMBURSEMENT INFORMATION:

Refer to section entitled **POSITION STATEMENT**.

PROGRAM EXCEPTIONS:

Federal Employee Program (FEP): Follow FEP guidelines.

State Account Organization (SAO): Follow SAO guidelines.

Medicare Advantage products:

No Local Coverage Determination (LCD) was found at the time of the last guideline review date.

The following National Coverage Determination (NCD) was reviewed on the last guideline review date: Medicare National Coverage Determinations Manual Chapter 1, Part 4 (Section 210-Prevention) located at cms.gov.

The following Centers for Medicare & Medicaid Services (CMS) Decision Memo was reviewed on the last guideline review date: CMS Decision Memo for Screening for Hepatitis C Virus (HCV) in Adults (CAG-00436N), June 2, 2014 located at cms.gov.

If this Medical Coverage Guideline contains a step therapy requirement, in compliance with Florida law 627.42393, members or providers may request a step therapy protocol exemption to this requirement if based on medical necessity. The process for requesting a protocol exemption can be found at Coverage Protocol Exemption Request.

DEFINITIONS:

No guideline specific definitions apply.

RELATED GUIDELINES:

Ambulatory Blood Pressure Monitoring (ABPM), 01-93875-16

Analysis of Human DNA in Stool Samples as a Technique for Colorectal Cancer Screening, 05-82000-27

Bone Mineral Density Studies, 04-70000-21

Computed Tomographic (CT) Colonography (Virtual Colonoscopy), 01-91000-06

Computed Tomography (CT) Thorax (Chest), 04-70450-21

Durable Medical Equipment (DME), 09-E0000-01

Genetic Testing, 05-82000-28

Genetic Testing for Hereditary Breast or Ovarian Cancer Syndrome and Other High-Risk Cancers (BRCA1, BRCA2, PALB2), 05-82000-30

OTHER:

Other names used to report preventive services:

Adult Wellness

Adult Wellness Preventive Care

Pediatric Preventive Services

Preventive Health Services

Routine Adult Care

Routine Screening Services

Well Child Care

Well Child Services

Women's Preventive Services

Florida State Mandated Coverage for Newborn & Infant Hearing Screening

HB 399 (Effective 07/01/00)

HB 963/SB 1124 (Effective 07/01/17)

Florida Statute 383.145 Newborn hearing screening

The intent of the mandate is to provide early hearing impairment screening, identification, and follow-up care for newborns and infants. The goal is to screen all newborns and infants for hearing impairment prior to discharge from the hospital, in order to alleviate the adverse effects of hearing loss on speech and language development, academic performance, and cognitive development. If the screening is not completed before discharge, the screening must be completed within 30 days after discharge. All health insurance policies and health maintenance organizations shall compensate providers for the covered benefit at the contracted rate. "Newborn" means an age range from birth through 29 days. "Infant" means an age range from 30 days through 12 months. "Screening" means a test or battery of tests administered to determine the need for an in-depth hearing diagnostic evaluation. All screenings are to be conducted by a licensed audiologist, physician, or appropriately supervised specifically trained individual.

Florida State Mandated Coverage for Mammograms (641.31095)

627.6418 Coverage for Mammograms

Every health maintenance contract issued or renewed on or after January 1, 1996, shall provide coverage for at least the following: (a) A baseline mammogram for any woman who is 35 years of age or older, but younger than 40 years of age. (b) A mammogram every 2 years for any woman who is 40 years of age or older, but younger than 50 years of age, or more frequently based on the patient's physician's recommendations. (c) A mammogram every year for any woman who is 50 years of age or older. (d) One or more mammograms a year, based upon a physician's recommendation for any woman who is at risk for breast cancer because of a personal or family history of breast cancer, because of having a history of biopsy-proven benign breast disease, because of having a mother, sister, or daughter who has had breast cancer, or because a woman has not given birth before the age of 30.

Florida State Mandated Coverage for Newborn Screening HB 963/SB 1124 (Effective 07/01/17)

Florida Statute 383.14- Screening for metabolic disorders, other hereditary and congenial disorders, and environmental risk factors

Every newborn in this state shall: 1. Before, becoming 1 week of age, be subject to a test for phenylketonuria; 2. Be tested for any condition included on the federal Recommended Uniform Screening Panel which the Genetics and Newborn Screening Advisory Council advises the Department of Health should be included under the state's screening program.

REFERENCES:

1. Centers for Disease Control and Prevention Immunization Schedules, 2025. http://www.cdc.gov/vaccines.
2. Recommendations for Preventive Pediatric Health Care Bright Futures/American Academy of Pediatrics, 2023.
3. USPSTF A and B Recommendations. U.S. Preventive Services Task Force, 2025. https://www.uspreventiveservicestaskforce.org/BrowseRec/Index/browse-recommendations.
4. Women's Preventive Services Health Resources and Services Administration (HRSA): Women's Preventive Services Guideline, 2025. https://www.hrsa.gov/womens-guidelines/index.html.

COMMITTEE APPROVAL:

This Medical Coverage Guideline (MCG) was approved by the Florida Blue Medical Policy and Coverage Committee on 12/04/25.

GUIDELINE UPDATE INFORMATION:

12/15/13	New Medical Coverage Guideline.
02/15/14	Revision; revised recommendation for: BRCA screening, breast cancer preventive medications, and added recommendation for gestational diabetes mellitus screening and lung cancer screening. Updated references.
05/15/14	Added Florida statute statement for mammograms. Updated references.
06/15/14	Revision; added USPSTF recommendation for screening for hepatitis B virus infection in persons at high risk for infection (Grade: B Recommendation) and updated Medicare Advantage program exception (added statement for prevention and screening for Hepatitis C Virus (HCV) in adults). Update references.
08/15/14	Updated reference; immunization schedules (2014).
10/15/14	Revision; added USPSTF recommendation for low-dose aspirin use for the prevention of morbidity and mortality from preeclampsia (Grade: B Recommendation). Update references.
11/15/14	Revised immunization tables for clarity.
04/15/15	Revision; revised statement for chlamydia screening (women), dental caries, gonorrhea screening (women), and sexually transmitted infection counseling. Added statement regarding application of fluoride varnish to infants and children teeth. Revised headers for dental caries prevention and healthy diet counseling. Added heading and statement for healthy diet and physical counseling to prevent cardiovascular disease (adults with cardiovascular risk factors). Added statement for preeclampsia prevention (aspirin). Added related guidelines. Updated references.
05/15/15	Revised chlamydia screening for women.
07/15/15	Updated immunizations section.
02/15/16	Updated references.
03/15/16	Added USPSTF recommendation for biennial screening mammography for women aged 50 to 74 years. Added USPSTF recommendation for screening for depression in the general adult population, including pregnant and postpartum women. Deleted USPSTF recommendation for screening mammography for women, with or without clinical breast examination, every 1 to 2 years for women age 40 years and older. Deleted USPSTF recommendation for screening adults for depression when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment, and follow-up. Updated references.
06/15/16	Added USPSTF recommendation for aspirin use to prevent cardiovascular disease and colorectal cancer: prevention medicine. Added related guidelines to the Preventive

	Services MCG: Durable Medical Equipment (DME), Genetic Testing, and Medical Nutrition Therapy. Updated references and guideline information section.
08/15/16	Revised USPSTF recommendation for colorectal cancer screening and syphilis screening: nonpregnant persons. Updated references.
09/15/16	Revised recommendation for diabetes screening, tobacco use counseling and interventions: nonpregnant adults and tobacco use counseling: pregnant women. Revised service name and description for aspirin use to prevent cardiovascular disease and colorectal cancer: prevention medicine. Revised description for: blood pressure screening in adults, breast cancer screening, dental caries prevention: infants and children up to age 5 years, depression screening: adolescents and blood pressure screening in adults. Delete iron supplementation in children. Deleted medications for risk reduction of primary breast cancer in women. Changed Grade from "A" to "B" for phenylketonuria screening: newborns.
02/15/17	Revised service description for breastfeeding; deleted counseling and added interventions. Revised the description for breastfeeding; added "providing". Updated references.
06/15/17	Revised "blood screening: adults". Deleted high blood pressure in adults: screening. Added USPSTF recommendation for preeclampsia: screening. Revised women's preventive service; screening for gestational diabetes and breastfeeding support, supplies, and counseling. Updated references.
07/01/17	Revision; added information to other section regarding newborn screening. Added related guideline, Analysis of Human DNA in Stool Samples as a Technique for Colorectal Cancer Screening. Updated references.
08/15/17	Revised service descriptor and description for obesity screening and counseling: children; added adolescents.
10/01/17	Added USPSTF recommendation for latent tuberculosis infection.
12/01/17	Added USPSTF recommendation for statin use in adults. Revised service description and description for visual acuity screening in children; added vision screening in children, deleted cholesterol abnormalities screening. Updated references.
02/16/18	Updated references.
04/15/18	Revision; reformat position statement, updated immunization section and references.
08/15/18	Revision; revised description for falls prevention: older adults and obesity screening: children and adolescents, and skin cancer behavioral counseling. Added statement for pediatric preventive services. Updated references.
08/23/18	Revised falls prevention older adults.
10/15/18	Revised description for cervical cancer screening and osteoporosis screening: women 65 years and older. Added osteoporosis screening: postmenopausal women younger than 65 years at increased risk of osteoporosis. Added women's preventive services: Screening for diabetes mellitus after pregnancy; Screening for urinary incontinence. Updated references.
10/17/18	Deleted HPV note.
12/15/18	Revised description for intimate partner violence screening: women of reproductive age, obesity screening and counseling: adults and syphilis screening: pregnant women. Revised description for alcohol use; delete alcohol misuse: screening and counseling and added unhealthy alcohol use: adults.
08/15/19	Update related guidelines section.
09/19/19	Format change; delete HPV *.
01/01/20	Revision; revised description for: bacteriuria screening: pregnant women, breast cancer preventive medications, BRCA risk assessment and genetic counseling/testing, gonorrhea prophylactic medication: newborns, screening: pregnant women, skin cancer behavioral counseling, syphilis screening: pregnant women. Revised service and description for: HIV screening nonpregnant. Added perinatal depression: counseling and interventions. HHS Women preventive services: added screening for breast cancer to women preventive services. Updated references.
05/15/20	Update; added web link to immunizations section for recommended immunization schedules. Added women's preventive service: screening for anxiety. Updated references.

07/01/20	Update; added USPSTF recommendation for: Prevention of Human Immunodeficiency Virus (HIV) Infection: Preexposure Prophylaxis.
09/15/20	Update; revised USPSTF recommendation for hepatitis C virus infection screening, added aged 18 to 79 years.
05/15/21	Review; revised and reformatted USPSTF recommendations. Updated references.
06/30/21	Update; added USPSTF recommendation for unhealthy drug use: screening.
12/15/21	Review; revised description: BRCA risk assessment, chlamydia screening, gestational diabetes screening, healthy diet and physical activity for cardiovascular disease, hepatitis B screening: nonpregnant adolescents and adults and tobacco use and preeclampsia: preventive medication. Revised service and description for blood screening, change to hypertension screening, adults. Revised women's preventive services: breastfeeding support, supplies and counseling and screening for diabetes mellitus after pregnancy.
01/01/22	Revision; revised colorectal cancer screening, added age 45 to 49 years and revised adults aged 50 to 75. Revised lung cancer screening, changed adults aged 55 to 50 and changed pack-year smoking history from 30 to 20.
06/15/22	Review; no change in position statement. Updated references.
08/26/22	Revision/update. Added prediabetes and type 2 diabetes: screening. Revised dental caries prevention. Deleted aspirin preventive medication. Updated references.
01/01/23	Revision/update. Revised depression screening: adolescents, syphilis screening: nonpregnant person, add adolescents and adults. Revised and updated women's preventive services
04/15/23	Revision/update. Updated immunizations and references.
09/01/23	Revision; revised statin use for primary prevention of cardiovascular disease in adults: preventive medication description.
11/01/23	Revision; added USPSTF recommendation for: anxiety in children and adolescents: Screening. Revised depression screening: adolescents descriptor.
01/01/24	Added statement for contraception mobile application.
03/15/24	Updated WPSI screening for urinary incontinence and references.
07/01/24	Revision/update. Added USPSTF recommendation for anxiety disorders in adults: screening. Revised tuberculosis screening: adults, depression screening: adults, folic supplementation and prevention of Human Immunodeficiency Virus (HIV) Infection: preexposure prophylaxis. Added code A9293.
10/01/24	Revision/update. Added USPSTF recommendation for screening for hypertensive disorders in pregnant persons.
03/15/25	Update; no change in position statement. Updated references.
05/01/25	Revision/update. Revised USPSTF recommendation for breast cancer screening, changed age 50 to 40.
07/01/25	Revision/update. Revised USPSTF recommendation for screening for obesity in children and adolescents 6 years or older.
10/01/25	Revision/update. Revised description. Added HRSA and nationally recognized public and private organizations. Revised reimbursement information.
01/01/26	Review Updated position statement and Women's Preventive Services guidelines; added patient navigation services for breast and cervical cancer screening. Updated references.

