BenAlert

Howitt Benefit Services is pleased to provide you with periodic updates on benefit trends and legislative updates. As part of our valuable services, we want to ensure that you are in compliance and well-informed of the ongoing changes in our industry.

In this BenAlert:
- Healthcare Reform Update
  PPACA: Women’s Preventive Care Services

Women’s Preventive Care Services

The Patient Protection and Affordable Care Act (PPACA), or as we call it, “healthcare reform,” now requires all non-grandfathered group health plans to offer a number of women’s preventive care services. On August 1, 2011, the Departments of the Treasury, Labor and Health and Human Services issued an amendment on preventive services, specifically regarding the guidelines for first dollar (no deductible) coverage.

For plan years beginning on or after August 1, 2012 (i.e. January 1, 2013 for calendar year group health plans), non-grandfathered plans must provide the following services:

- **Well-Woman Visits** – Annually (with additional visits as necessary)
- **Screening for Gestational Diabetes** – Between 24-28 weeks of gestation, and at first prenatal visit for high-risk women
- **Human papillomavirus (HPV) DNA Testing** – Every three years starting at age 30
- **Sexually-Transmitted Infections Counseling** – Annually
- **HIV Counseling and Screening** – Annually
- **FDA-Approved Contraception, Sterilization Procedures, and Counseling** – As prescribed
- **Breastfeeding Support, Supplies, and Counseling** – Each birth
- **Domestic Violence Screening and Counseling** – Annually
In addition to the new guidelines, the amendment issued on August 1 will exempt “religious employers” from covering contraceptive services for women. An organization may be considered a “religious employer” if the organization’s purpose is to instill religious values, and the organization primarily employs and serves persons who share the organization’s religious tenets.

The latest guidance helpfully clarifies the scope of what preventive services means for women, but **many questions still remain** about preventive care under health care reform.

**Billing Issues: Office Visits.** Employees would need to have their physician bill separately for the preventive service. If the visit was for purposes beyond the preventive services, the insurance plan may apply cost-sharing to the office visit. This may prove to be an issue for some employees.

We will provide more information on preventive care issues as it becomes available.

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