



# A Guide to CIGNA's Preventive Health Benefits for Health Care Professionals

*These Preventive Health Benefits are derived from the clinical recommendations of the U.S. Preventive Services Task Force (USPSTF): Guide to Clinical Preventive Services and the recommendations of the Advisory Committee on Immunization Practices (ACIP), as well as other nationally recognized sources. This is a summary of CIGNA HealthCare's standard Preventive Health Benefits. This information does not supersede the specific terms of a participant's health benefit plan, or replace the clinical judgment of the treating physician with respect to appropriate and necessary care for a particular patient.*

## **Introduction:**

Most, although not all, CIGNA HealthCare Benefit Plans contain a provision for coverage of Preventive Health Services. Depending on individual benefit plan provisions, preventive services may be reimbursed at 100% without application of deductible, coinsurance or benefit limits. Other health benefit plans cover these services, subject to deductible, coinsurance, and/or other benefit limitations.

## **Preventive Services:**

While to some degree all health care services are preventive in nature, services designated as Preventive Care in most CIGNA HealthCare plans include periodic well visits, routine immunizations and routine screening of symptom-free or disease-free individuals. Preventive Care services also generally include additional immunization and screening services for symptom-free or disease-free individuals at increased risk for a particular disease. Services not covered under the Preventive Care benefit may be covered under another portion of the health benefit plan.

The accurate identification and prompt processing of Preventive Health Service claims is dependent upon appropriate coding of services, such as the use of a primary diagnosis code which describes encounters with health services which are not for the treatment of an illness or injury. These codes are provided in the coding reference known as the "International Classification of Diseases-9" (ICD-9), located in the section indexed as "V" codes.

In addition, the use of CPT codes designated as "Preventive Medicine Evaluation and Management Services" is utilized to differentiate such services from problem-oriented Evaluation and Management office visits. The chart below provides CPT Code descriptions and examples of associated ICD-9 and CPT codes (*see chart beginning on page 2*).



| Preventive Benefit   | Well person ICD-9 codes          | CPT® Codes include, but may not be limited to those listed below: |
|--|----------------------------------|---|
| <p><b>Comprehensive Preventive Evaluation and Management Services</b></p> <ul style="list-style-type: none"> <li>Initial (new patient) comprehensive preventive medicine evaluation and management of an individual includes: an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of appropriate immunization(s), laboratory/diagnostic procedures. (CPT codes 99381-99387)</li> <li>Periodic (established patient) comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of appropriate immunizations, laboratory/diagnostic procedures. (CPT codes 99391-99397)</li> </ul> <p><i>Note that Codes 99381-99397 include counseling/anticipatory guidance/risk factor reduction interventions which are provided at the time of the initial or periodic comprehensive preventive medicine examination. <sup>1</sup></i></p> <p>Typically the periodic well person <b>examination</b> component of the Preventive Evaluation and Management service includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>Age and gender-appropriate review of physical condition, including vital signs, height/weight/BMI, review of family and personal health risks, screening (not examination) of vision and hearing status, growth and development milestones.</li> </ul> <p>Typically the <b>counseling /anticipatory guidance/risk factor reduction</b> component of the Preventive Evaluation and Management service includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>Anticipatory guidance regarding injury prevention (such as recreational vehicle helmet protection, auto seat belt use, infant/child car seat use, home firearm storage/removal), infant sleep positioning, oral health (including water fluoridation discussion), breast feeding counseling, and violence prevention. Education regarding risk reduction, such as sun protection for prevention of skin cancer, sexual behavior/STD prevention, aspirin prophylaxis for cardiovascular risk; basic screening and counseling regarding substance abuse, tobacco use, obesity, exercise and healthy diet/nutritional counseling.</li> </ul> | <p>Such as codes: V2XX, V7XX</p> | <p>99381-99387:<br/>99391-99397</p>                               |

<sup>1</sup> Current Procedural Terminology (CPT®) 2006, American Medical Association

| Preventive Benefit   | Well person ICD-9 codes                          | CPT® Codes include, but may not be limited to those listed below:   |
|--|--|---|
| <p><b>Preventive Medicine, Individual Counseling</b></p> <p>Preventive Medicine, Individual Counseling; The CPT manual identifies codes 99401-99404 to report services provided to individuals at a <b>separate encounter</b> [from the Preventive Medicine or problem oriented Evaluation and Management] for the purpose of promoting health and preventing illness or injury.</p> <p>Preventive medicine counseling and risk factor reduction interventions provided at a separate encounter will vary with age and should address such issues as family problems, diet and exercise, substance abuse, sexual practices, injury prevention, dental health, and diagnostic and laboratory test results available at the time of the encounter.</p> <p>These codes are not to be used to report counseling and risk factor reduction interventions provided to patients with symptoms or established illness. For counseling individual patients with symptoms or established illness, use the appropriate office, hospital, or consultation or other evaluation and management codes. <sup>1</sup></p> | <p>Such as codes: V2XX, V7XX</p>                 | <p>99401-99404</p>  |
| <p><b>Immunizations</b></p> <p>Routine Immunizations and Administration of Vaccines (Refer to CDC's posted schedule of Immunizations for 2006-2007)</p> <p><a href="http://www.cdc.gov/nip/recs/child-schedule.htm">http://www.cdc.gov/nip/recs/child-schedule.htm</a></p> <p><a href="http://www.cdc.gov/nip/recs/adult-schedule.htm">http://www.cdc.gov/nip/recs/adult-schedule.htm</a></p> <p>Note: The ACIP/CDC have recommended the use of Zostavax® for individuals over age 60 to protect against shingles, however, the CDC adult immunization schedule has not yet been updated with that information. CIGNA HealthCare covers Zostavax® in accord with the ACIP recommendation.</p> <p>Please note that immunizations which are administered solely for the purpose of travel or occupation are typically excluded from coverage in most CIGNA HealthCare plans.</p>   | <p>Such as codes: V03.X, V04.X, V05.X, V06.X</p> | <p>90632-90660: 90669: 90680: 90700-90716: 90718-90723: 90732-34: 90736-90748</p> <p><u>Administration codes:</u> according to the CPT manual:</p> <ul style="list-style-type: none"> <li>■ use 90465-68 when the physician provides face-to-face counseling of the patient/family during the administration of a vaccine;</li> <li>■ When a vaccine administration is not accompanied by face-to-face physician counseling of the patient/family, use codes 90471-90474</li> </ul> |

<sup>1</sup> Current Procedural Terminology (CPT®) 2006, American Medical Association

| Preventive Benefit   | Well person ICD-9 codes                        | CPT® Codes include, but may not be limited to those listed below:   |
|--|--|---|
| <b>Screenings</b>  |  |   |
| <b>Prostate Cancer Screening:</b> Age 50 and older, PSA, once every year (or at any age if risk factors present) | A general medical exam code can be used: V7X.X | 84152-84154: G0103  |
| <b>Cervical Cancer Screening:</b> Ages 19-64, Pap at least every three years                                     | Such as code: V76.2                            | 88141-88154: 88164-88167: 88174-88175: 87620-87622: G0123: G0124: G0141: G0143-45: G0147: G0148: Q0091: P3000: P3001) |
| <b>Breast Cancer Screening:</b> Age 40 (or earlier if risk factors present), Mammography, once every year        | Such as code: V76.X                            | 77051: 77052 (have replaced 76082,83): 77055-57 (have replaced 76092)   |
| <b>Colorectal Cancer Screening:</b> Age 50 and older, routinely; (or at any age if risk factors present);        | Such as code: V76.X                            |   |
| Colonoscopy every 10 years; OR   |  | 45378: 45380: 45383: 45384: 45385: G0105: G0121   |
| Sigmoidoscopy every 5 years; OR  |  | 45330: 45331: 45338: 45339: G0104   |
| Fecal occult blood annually; OR  |  | 82270: 82272: 82274: G0328  |
| Barium enema every 5 years   |  | 74270: 74280: G0106: G0120: G0122   |

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| Preventive Benefit   | Well person ICD-9 codes | CPT® Codes include, but may not be limited to those listed below: |
|--|-------------------------|---|
| <b>Chlamydia Screening:</b> Age 25 and under, sexually active females  | Such as code: V73.X     | 87490-91: 87320: 87270  |
| <b>Osteoporosis Screening:</b> Women Age 65 and older (Age 60 if risk factors), typically this is once/lifetime screening. | Such as code: V77.X     | 77080-81: 76977: G0130: 77078-79:*                                |
| <b>AAA by Ultrasound Screening:</b> Men Age 65-75, who have smoked, this is once/lifetime screening                        | Such as code: V70.X     | 76700: 76705: 76770: 76775  |
| <b>Cholesterol/Lipid Disorders Screening:</b> Age 20 and older, every 5 years <sup>3</sup>                                 | Such as code: V77.XX    | 80061: 82465: 83718-21: 84478                                     |
| <b>Diabetes Screening:</b> Age 45 and older, every 3 years and at any age for adults with Hyperlipidemia/Hypertension      | Such as code: V77.XX    | 82947: 82948  |

<sup>1</sup> Current Procedural Terminology (CPT®) 2006, American Medical Association

<sup>2</sup> International Classification of Diseases, 9th Revision, Copyright © 2006, Practice Management Information Corporation

<sup>3</sup> National Heart, Lung and Blood Institute; National Cholesterol Education Program, Adult Treatment Panel III, May 2001

United States Preventive Services Task Force: accessed January 2007.

Available at URL address: <http://www.ahrq.gov/clinic/uspstfix.htm>

\* CPT codes 77078 and 77079 require precertification (computed tomography, bone mineral density study, 1 or more sites; axial skeleton, or computed tomography, bone mineral density study, 1 or more sites; appendicular skeleton (peripheral) (eg, radius, wrist, heel).

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