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# New Mandatory Preventive Items and Services

## 2021 Updates

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Most plans will be required to cover new preventive items and services beginning later this year, or in 2022 or 2023 (depending on the plan year), including ones related to Hepatitis B virus infection screenings and colon cancer screenings.

## Background

Non-grandfathered group health plans must provide coverage for in-network preventive items and services and may not impose any cost-sharing requirements (such as a copayment, coinsurance, or deductible) with respect to those items or services.

Evidence-based items or services that have in effect a rating of A or B in the current recommendations of the United States Preventive Services Task Force (“USPSTF”) are considered to be “preventive.” The USPSTF recommendations can change, and those changes generally apply for plan years that begin on or after the date that is one year after the date the new recommendation or guideline is considered to be issued.

Topic	USPSTF Recommendation	Effective for Plan Years Beginning On or After:
Unhealthy drug use screening: adults age 18 years or older	Screening by asking questions about unhealthy drug use in adults age 18 years or older when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred	July 1, 2021
Sexually transmitted infections behavioral counseling: sexually active adolescents and adults at increased risk	Behavioral counseling for all sexually active adolescents and for adults who are at increased risk for sexually transmitted infections	September 1, 2021
Healthy diet and physical activity behavioral counseling intervention for cardiovascular disease prevention: adults 18 years or older with cardiovascular disease risk factors	Offering or referring adults age 18 years or older with cardiovascular disease risk factors to behavioral counseling interventions to promote a healthy diet and physical activity	December 1, 2021

Topic	USPSTF Recommendation	Effective for Plan Years Beginning On or After:
Hepatitis B virus infection screening: adolescents and adults at increased risk for infection	Screening for hepatitis B virus (HBV) infection in adolescents and adults at increased risk for infection	January 1, 2022
Tobacco smoking cessation and behavioral interventions: all adults	For non-pregnant adults, it is recommended that clinicians ask about tobacco use, advise cessation of use, and provide behavioral interventions and U.S. FDA-approved pharmacotherapy for cessation	December 1, 2021
For pregnant persons, it is recommended that clinicians ask about tobacco use, advise cessation of use, and provide behavioral intervention for cessation	February 1, 2022	December 1, 2021
Lung cancer screening: adults age 50 to 80 years who have a 20 pack-year history and currently smoke or have quit within the past 15 years	Annual screening for lung cancer with low-dose computed tomography (LDCT) in adults age 50 to 80 years old who have a history of smoking at least 20 packs of cigarettes per year and who currently smoke or have quit smoking within the past 15 years	April 1, 2022
Hypertension screening: adults age 18 years or older without known hypertension	Hypertension screening in adults 18 years or older with office blood pressure measurement, and blood pressure measurement outside of the clinical setting for diagnostic confirmation before starting treatment	May 1, 2022
Colorectal cancer screening: adults age 45 to 75 years old	Colorectal cancer screening for all adults age 45 to 75 years old	June 1, 2022
Healthy weight and weight gain in pregnancy behavioral counseling interventions: pregnant persons	Clinicians offer pregnant persons effective behavioral counseling interventions aimed at promoting healthy weight gain and preventing excess gestational weight gain in pregnancy	June 1, 2022

## Employer Action

Employers sponsoring non-grandfathered group health plans should review the various preventive care requirements effective for their upcoming plan years. Such coverage must be provided in-network, without cost-sharing.

For fully insured health plans, carriers are generally responsible for compliance and should include these benefits as applicable. Self-funded health plans should discuss with TPAs to ensure coverage is in effect for plan years that begin on or after the applicable effective dates.

For a complete list of preventive items and services, visit:

<https://uspreventiveservicestaskforce.org/uspstf/recommendation-topics>