411 - WOMEN’S PREVENTIVE CARE SERVICES

EFFECTIVE DATES: 10/01/15, 10/01/18, 02/01/21

APPROVAL DATES: 09/06/18, 11/19/20

I. PURPOSE

This Policy applies to ACC, ALTCS E/PD, DCS/CMDP (CMDP), DES/DDD (DDD), and RBHA Contractors; Fee-For-Service (FFS) Programs including: the American Indian Health Program (AIHP), Tribal ALTCS, and all FFS populations, excluding Federal Emergency Services (FES). (For FES, refer to AMPM Chapter 1100.) This Policy establishes requirements for well-woman preventive care visits as a covered benefit for women to obtain the recommended preventive services, including Preconception Counseling.

II. DEFINITIONS

**CLINICAL BREAST EXAM** A physical examination of the breasts by a health care provider used as a primary diagnostic procedure for early detection of breast cancer.

**FAMILY PLANNING SERVICES AND SUPPLIES** The provision of accurate information, counseling, and discussion with a health care provider to allow members to make informed decisions about the specific family planning methods available that align with the member’s lifestyle and provision of indicated supplies.

**HUMAN PAPILLOMAVIRUS (HPV)** A sexually transmitted infection for which a series of immunizations are available for both males and females.

**MAMMOGRAM** An x-ray of the breasts used to look for early signs of breast cancer.

**PRECONCEPTION COUNSELING** The purpose of Preconception Counseling is to ensure that a woman is healthy prior to pregnancy by identifying/reducing behavioral and social risks, through preventive and management interventions, in women of reproductive age who are capable of becoming pregnant, regardless of whether she is planning to conceive. This counseling focuses on the early detection and management of risk factors before pregnancy and includes efforts to influence behaviors that can affect a fetus prior to conception. Preconception Counseling is considered included in the well-woman preventive care visit.
III. Policy

A well-woman preventive care visit is covered on an annual basis.

A. Contractor Requirements For Well-Woman Preventive Care Services

Contractors shall develop policies and procedures to monitor, evaluate, and improve women’s participation in preventive care services.

Contractors shall:

1. Inform all participating Primary Care Providers (PCPs), including Obstetrician/Gynecologist (OB/GYN) providers of the availability of women’s preventive care services, detailing the covered services included as part of the well-woman preventive care visit, as outlined in this Policy.

2. Develop and implement a process for monitoring compliance with well-woman preventive care services provider requirements.

3. Develop, implement, and maintain a process to inform members about women’s preventive health services as specified in this Policy, in AMPM Exhibit 400-3, and that align with the requirements in ACOM Policy 406. This information shall be provided as specified in ACOM Policy 405.

   a. This information shall include:
      i. The benefits of preventive health care,
      ii. A complete description of the services available as described in the provider requirements,
      iii. A statement that provides assistance with information on how to obtain medically necessary transportation as specified in AMPM Policy 310-BB including scheduling appointments to obtain well-woman preventive care services, and
      iv. A statement that there is no copayment or other charge for women’s preventive care visit as specified in ACOM Policy 431.

B. Well-Woman Preventive Care Services Provider Requirements

Provider requirements for well-woman preventive care services include the following:

1. Covered services included as part of a well-woman preventive care visit:
   An annual well-woman preventive care visit is intended for the identification of risk factors for disease, identification of existing physical/behavioral health problems, and promotion of healthy lifestyle habits essential to reducing or preventing risk factors.
for various disease processes. As such, the well-woman preventive care visit is inclusive of a minimum of the following:

a. A physical exam (Well Exam) that assesses overall health,

b. Clinical Breast Exam,

c. Pelvic exam (as necessary, according to current recommendations and best standards of practice),

d. Review and administration of immunizations, screenings, and testing as appropriate for age and risk factors as specified in AMPM Chapter 300,

e. Screening and counseling focused on maintaining a healthy lifestyle and minimizing health risks and addresses at a minimum the following:
   i. Proper nutrition,
   ii. Physical activity,
   iii. Elevated BMI indicative of obesity,
   iv. Tobacco/substance use, abuse, and/or dependency,
   v. Depression screening,
   vi. Interpersonal and domestic violence screening, that includes counseling involving elicitation of information from women and adolescents about current/past violence and abuse, in a culturally sensitive and supportive manner to address current health concerns about safety and other current or future health problems,
   vii. Sexually transmitted infections,
   viii. Human Immunodeficiency Virus (HIV),

ix. Family Planning Services and Supplies, (refer to AMPM Policy 420),

x. Preconception Counseling that includes discussion regarding a healthy lifestyle before and between pregnancies that includes:
   (a) Reproductive history and sexual practices,
   (b) Healthy weight, including diet and nutrition, as well as the use of nutritional supplements and folic acid intake,
   (c) Physical activity or exercise,
   (d) Oral health care,
   (e) Chronic disease management,
   (f) Emotional wellness,
   (g) Tobacco and substance use (caffeine, alcohol, marijuana, and other drugs), including prescription drug use, and
   (h) Recommended intervals between pregnancies, and

f. Initiation of necessary referrals when the need for further evaluation, diagnosis, and/or treatment is identified.

Genetic screening and testing are not covered, except as specified in AMPM Policy 310-II.

2. Well-Woman Preventive Care Service Standards
a. Immunizations:
   i. AHCCCS covers the HPV vaccine for members, as specified in AMPM Policy 310-M,
   ii. Providers shall coordinate with The Arizona Department of Health Services (ADHS) Vaccines for Children (VFC) Program in the delivery of
immunization services if providing vaccinations to Early and Periodic Screening, Diagnostic and Treatment (EPSDT) aged members less than 19 years of age, Providers shall enroll and re-enroll annually with the VFC program, as specified in AMPM Policy 430,

iii. Immunizations shall be provided according to the Advisory Committee on Immunization Practices Recommended Schedule as specified on the CDC website https://www.cdc.gov/vaccines/schedules/index.html, and

iv. Contractors shall not utilize AHCCCS funding to purchase vaccines covered through the VFC program for members younger than 19 years of age, and

b. Screenings as specified in AMPM Chapter 300 and AMPM Policy 430.