

Government Issues Guidelines Requiring Health Insurers to Provide Free Preventative Services for Women

The U.S. Department of Health and Human Services recently announced new guidelines requiring health insurers to cover a range of preventative services for women with no cost-sharing, as required by the health reform law passed by Congress in early 2010.

Under the guidelines, health plans must cover the following eight services:

- Well-woman visits;
- Screening for gestational diabetes
- Human papillomavirus (HPV) DNA testing for women 30 years and older;
- Sexually-transmitted infection counseling;
- Human immunodeficiency virus (HIV) screening and counseling;
- FDA-approved contraception methods and contraceptive counseling;
- Breastfeeding support, supplies, and counseling; and
- Domestic violence screening and counseling.

New health plans must include the preventative services without cost-sharing in their insurance policies for plan years beginning August 1, 2012.

The preventative services coverage requirements do not apply to certain “grandfathered” health plans.

“[The Affordable Care Act](#) helps stop health problems before they start,” said HHS Secretary Kathleen Sebelius. “These historic guidelines are based on science and existing literature and will help ensure women get the preventative health benefits they need.”

The guidelines can be found online at: www.hrsa.gov/womensguidelines/

For more information about these new guidelines, please contact your attorney contact at our firm.