



July 20, 2010

New Regulations on Health Plan Requirements for Preventive Services

New rules from the Internal Revenue Service (IRS), Departments of Labor (DoL) and Health and Human Services' (HHS) require non-grandfathered health care plans to cover the following preventive services with no cost sharing:

- For all plan participants, [United States Preventive Services Task Force \(USPSTF\)](#) recommendations that have a current rating of [A](#) or [B](#).

The Business Group has a [comprehensive list of USPSTF recommended preventive services](#) available for reference.

- For children, adolescents and adults, Centers for Disease Control and Prevention (CDC)- approved immunizations recommended for routine use by its [Advisory Committee on Immunization Practices](#).

For further information, please also see the Business Group's [evidence statement, CPT codes and summary plan description language for immunizations](#).

- For infants, children, and adolescents, [Health Resources and Services Administration \(HRSA\) guidelines for preventive care and screenings](#).
- For women, HRSA guidelines for preventive care and screening not otherwise addressed by the recommendations of the USPSTF. *HHS is developing these guidelines and expects to issue them no later than August 1, 2011.*

These rules will go in effect on or after September 23, 2010 (January 1, 2011 for calendar year plans).

For more information on the USPSTF recommendations for employers, please visit our preventive services website at www.businessgrouphealth.org/preventive.