

(352) 524-2492 Patricia.Nguyen@floridablue.com

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Dear Patty:

Q: What are some of the Women's Preventive Services at \$0 member cost share in-network?

A: Below is a list of some of the services.

PREVENTIVE SERVICE	DESCRIPTION OF BENEFITS
Human Papillomavirus (HPV) Testing	High-risk human papillomavirus DNA testing in women with normal cytology results. Screening should begin 30 years of age and should occur no more frequently than every 3 years. Note: To avoid additional out of pocket expenses, please remind your doctor to send the specimen to Quest Diagnostics, the preferred in-network lab.
Counseling for sexually transmitted infections	 The following screenings are covered at \$0 when billed with a routine diagnosis code: Chlamydial infection screening, Gonorrhea screening, Hepatitis B screening and Syphillis screening. These services can be obtained through your Primary Care Physician (PCP) or through your behavioral health benefits.



Patty's Points



Patty Nguyen, On-Site Representative (813) 794-2492 (727) 774-2492 (352) 524-2492 Patricia.Nguyen@floridablue.com

Counseling & screening for human immune-deficiency virus (HIV)	These services can be obtained through your Primary Care Physician (PCP) or through your behavioral health benefits.
Screening & counseling for interpersonal & domestic violence	These services can be obtained through your Primary Care Physician (PCP) or through your behavioral health benefits.
Screening for Gestational Diabetes	This is a lab test performed on pregnant women between 24 and 28 weeks of gestation, and at the first prenatal visit for pregnant women who are at high risk for diabetes.
Lactation Support & Counseling	 Prenatal services are covered as part of OB/GYN counseling. Postpartum services provided as needed in the hospital during delivery stay or in OB/GYN office post-delivery.
Breastfeeding Pump	One electric or manual breast pump per pregnancy to be obtained through preferred durable medical equipment provider, CareCentrix. Please contact CareCentrix at 1-877-561-9936 to request authorization. Important: If you do not get prior authorization, it will not be covered.
Well Woman Visits	Well woman preventive care visit annually for adult women to obtain the recommended preventive services that are age and developmentally appropriate, including preconception care and many services necessary for prenatal care.





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	One Adult Wellness Visit per calendar year. In addition, a well woman exam including the Pap Test is covered. Florida Blue follows guidelines as recommended by the CDC and AHRQ. Women age 21 -29 should have Pap Test every 3 years. Women age 30-65 should have Pap Test alone every 3 years combined with HPV testing every 5 years. Women ages 65+ should discuss with their doctor. This may be performed by your Primary Care Physician or OB-GYN.
Contraceptive methods & counseling	 Education and counseling related to contraceptives and sterilization. Intrauterine Devices (IUD's) are covered 100% of allowable charges when billed as routine. This includes the insertion and removal of the device by an in-network provider. Devices covered at \$0 include those currently on the market: Paragard, Mirena, Skyla, Kyleena, and Liletta. Click here to see a complete list of contraceptive methods covered at \$0. Surgical sterilization. The professional fees for tubal ligations will be covered at \$0 cost share in network. Copays/Deductible/Coinsurance for the facility charges (hospital) will still apply.
BRCA risk assessment and genetic counseling/testing	Provides Screening for women who have family members with breast, ovarian, tubal or peritoneal cancer to test for an increased risk breast cancer through the presence of mutated BRCA1 or BRCA2 genes. Women with positive screening results should receive



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> genetic counseling and, if indicated after counseling, BRCA testing.

- Genetic Counseling, and if necessary, genetic testing for BRCA Mutation covered at no cost share by the member.
- Applies to women who have been previously diagnosed with cancer, as long as she is NOT currently symptomatic of or receiving active treatment for breast, ovarian, tubal, or peritoneal cancer. (Prior Authorization is required.)

Note: To avoid out of pocket expenses, please remind your doctor to use Quest Diagnostics, the preferred in-network lab.

Q: I had a screening mammogram 3 months ago and now my doctor is ordering a diagnostic mammogram. Is it a \$0 copay as well?

A: Yes, diagnostic mammograms are covered and it is \$0 copay. However, if your doctor ordered any other tests, such as ultrasounds or MRI's, then there will be a member cost share based on your plan type and where you have the services.

Q: Is a 3D Mammogram covered under my plan?

A: Yes, Florida Blue began covering 3D Mammograms in 2018...



Q: Are oral contraceptives covered under this mandate?

A: Yes, prescribed generic oral contraceptives, emergency contraceptives and diaphragms will be covered under the retail pharmacy benefit at \$0 cost share. (Note: If there is a medical reason why a member cannot use any of the generic oral contraceptives, an exception process administered by Prime will be available.). Please click here for a complete list of Women's preventive medications.

Q: Are hospital grade electric breast pumps covered as well?

A: No, these are excluded except when medically necessary during an inpatient stay.

Q: I got billed from an out of network lab that provided the HPV Testing and Pap Test Results. What should I do?

A: First, contact the doctor's office that ordered the lab work. Explain to them that you were billed by the out of network lab and they did not make you aware that the lab work was being sent to a lab other than Quest Diagnostics. If your efforts do not result in a favorable resolution, please contact me for assistance.