



On August 1, 2011, the Department of Health and Human Services (HHS) adopted guidelines that will require non-grandfathered health plans to provide women's preventive services with no cost sharing for participants. The new guidelines will apply to group health plans for plan years beginning on or after August 1st, 2012.

Background

The Affordable Care Act (ACA) includes a provision that requires non-grandfathered health plans to provide a range of preventive services with no cost sharing to participants. This general ACA preventive care requirement was effective for plan years beginning after September 23, 2010. The law also required HHS to consider additional preventive services for women that were not included in the original guidelines as defined in the ACA. In response to this requirement, HHS directed the Institute of Medicine (IOM), an independent organization, to conduct a review and provide recommendations on specific preventive measures related to women's health needs. The IOM issued a report on July 19, 2011, which HHS used in developing the new guidelines.

Preventive Services for Women

Under the new guidelines additional women's preventive services that will be covered without cost sharing requirements include:

- **Well-woman visits:** This would include an annual well-woman preventive care visit for adult women to obtain the recommended preventive services.
- **Gestational diabetes screening:** This screening is for women 24 to 28 weeks pregnant, and those at high risk of developing gestational diabetes.
- **HPV DNA testing:** Women who are 30 or older will have access to high-risk human papillomavirus (HPV) DNA testing every three years.
- **STI counseling, and HIV screening and counseling:** Women will have access to annual counseling on HIV and sexually transmitted infections (STIs).

- **Contraception and contraceptive counseling:** Women will have access to all FDA approved contraceptive methods, sterilization procedures, and patient education and counseling. These recommendations do not include abortifacient drugs.
- **Breastfeeding support, supplies, and counseling:** Pregnant and postpartum women will have access to comprehensive lactation support and counseling from trained providers.
- **Domestic violence screening.**

Exemption for Certain Religious Employers

An additional regulation was also released which gives "religious employers" the choice of buying or sponsoring group health insurance that does not cover contraception if that is inconsistent with their religious tenets. A "religious employer" is an organization that meets all of the following criteria:

- The inculcation of religious values is the purpose of the organizationThe organization primarily employs persons who share the religious tenets of the organizationThe organization serves primarily persons who share the religious tenets of the organization
- The organization is a nonprofit organization as described in section 6033 of the Internal Revenue Code

More Information

A more detailed description of the "Guidelines for Women's Preventive Services" can be found at: www.hrsa.gov/womensguidelines

Interim final rule regarding the exceptions allowed for religious organizations can be found at: www.ofr.gov/OFRUpload/OFRData/2011-19684_PI.pdf