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Updated U.S. Preventive Services Task Force List

WHAT IS THE U.S. PREVENTIVE SERVICES TASK FORCE?

The U.S. Preventive Services Task Force (USPSTF) is an independent group of national experts in prevention and evidence-based medicine that makes recommendations about clinical preventive services such as screenings, counseling services, or preventive medications.

WHY ARE THESE UPDATES IMPORTANT?

The USPSTF A and B Recommendations list of preventive services is one of the sources used to define preventive services under the Affordable Care Act (ACA). Non-grandfathered group health plans (self-funded and fully insured) are required to cover preventive services with no cost sharing, subject to reasonable medical management, when the services are rendered by an in-network provider. The recommendations or guidelines are effective for plan years beginning one year after the recommendation or guideline is used.

WHAT NEW TOPICS HAVE BEEN ADDED TO THE USPSTF A AND B RECOMMENDATIONS LIST?

The topics and descriptions below are taken directly from the USPSTF Recommendations list.

1. [Gestational diabetes mellitus screening](#): The USPSTF recommends screening for gestational diabetes mellitus in asymptomatic pregnant women after 24 weeks of gestation. (Release date: January 2014)
2. [Lung cancer screening](#): The USPSTF recommends annual screening for lung cancer with low-dose computed tomography in adults, ages 55 to 80 years, who have a 30 pack-per-year smoking history, and currently smoke or have quit within the past 15 years. Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery. (Release date: December 2013)
3. [Tobacco use interventions: children and adolescents](#): The USPSTF recommends that clinicians provide interventions, including education or brief counseling, to prevent initiation of tobacco use in school-aged children and adolescents. (Release date: August 2013)

Affordable Care Act Implementation Alert

The Affordable Care Act and your self-funded health plan

WHAT CURRENT TOPICS HAVE UPDATED DEFINITIONS?

The topics and descriptions below are taken directly from the USPSTF Recommendations list.

1. [BRCA risk assessment and genetic counseling/testing](#): The USPSTF recommends that primary care providers screen women who have family members with breast, ovarian, tubal, or peritoneal cancer with one of several screening tools designed to identify a family history that may be associated with an increased risk for potentially harmful mutations in breast cancer susceptibility genes (BRCA1 or BRCA2). Women with positive screening results should receive genetic counseling and, if indicated after counseling, BRCA testing. (Release date: December 2013)
2. [Breast cancer preventive medications](#): The USPSTF recommends that clinicians engage in shared, informed decision making with women who are at increased risk for breast cancer about medications to reduce their risk. For women who are at increased risk for breast cancer and at low risk for adverse medication effects, clinicians should offer to prescribe risk-reducing medications, such as Tamoxifen or Raloxifene. (Release date: September 2013)

For the complete USPSTF A and B Recommendations List, please visit the [USPSTF website](#).

HOW CAN INDEPENDENCE ADMINISTRATORS HELP?

As new or significantly revised regulations or guidance take effect, we will provide you with information and resources to help you understand how the regulations affect your health plan(s) and what your plan(s) must do to achieve compliance. To learn more about how Independence can support you in complying with the requirements of the Affordable Care Act, or if you have questions about your plan, please contact your Independence Administrators account representative.

Independence Administrators does not provide legal or tax advice. The final determination of whether the Plan Sponsor meets the requirements of the Affordable Care Act must be made by the Plan Sponsor in consultation with the employer's own legal counsel or tax advisor.

