



## Health care reform at-a-glance

# Preventive care coverage: Colonoscopy procedure

The Affordable Care Act (ACA or health care reform law) requires nongrandfathered health plans to cover evidence-informed preventive care and screenings provided for in comprehensive guidelines supported by the Health Resources and Services Administration (HRSA) department of Health and Human Services (HHS), when the services are rendered by an in-network provider and/or facility.

Colorectal cancer screening received an “A” rating from the United States Preventive Services Task Force (USPSTF), meaning that there is a high certainty that the net benefit is moderate to substantial and that the USPSTF recommends the service. However, not every colonoscopy is done for screening purposes. Many are done for diagnostic purposes after the patient presents with signs or symptoms. There are two types of colonoscopy procedures:

1. Screening colonoscopy procedures, and
2. Diagnostic colonoscopy procedures

Because the same procedure may be done for either a preventive screening, or as a diagnostic procedure, Anthem must rely on provider billing to accurately identify the service as preventive or diagnostic.

Listed below is Anthem’s coverage, based on the current procedural terminology (CPT) code(s) billed by the provider.

- Colonoscopies that are done for screening purposes and use an appropriate preventive screening diagnosis code (even if polyps are removed) are covered as a preventive screening with no member cost share (such as copayment, coinsurance and/or deductible).
  - Anesthesia charges and other associated facility charges are also covered as preventive when the colonoscopy is billed with an appropriate preventive screening diagnosis code.
- Colonoscopies that are done for diagnostic purposes when the member presents with symptoms should be covered as a regular medical/surgical service, and the procedure will be subject to member benefits and could have cost share (such as copayment, coinsurance and/or deductible).

It is recommended that members undergoing a colonoscopy as a preventive screening confirm that the provider and facility are in-network. In-network providers have been educated on preventive benefits under the health care reform law.

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