



WOMEN'S PREVENTIVE HEALTH BENEFITS – NEW CHANGES EFFECTIVE AUGUST 1, 2012

As you may know, the Affordable Care Act (ACA, or health care reform law) includes changes that are being phased in over a number of years. The latest set of changes includes additional benefits for certain Women's Preventive Health Services.

When plans renew or are effective on or after August 1, 2012, all of the following women's health services will be considered preventive (some were already covered). These services generally will be covered at no cost share, when provided in-network:

- Well-woman visits (annually and now including prenatal visits)
- Screening for gestational diabetes
- Human papillomavirus (HPV) DNA testing
- Counseling for sexually transmitted infections
- Counseling and screening for human immunodeficiency virus (HIV)
- Screening and counseling for interpersonal and domestic violence
- Breastfeeding support, supplies and counseling
- Generic formulary contraceptives, certain brand formulary contraceptives, and FDA-approved over-the-counter female contraceptives with prescription are covered without member cost share (for example, no copayment). Certain religious organizations or religious employers may be exempt from offering contraceptive services.

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