Preventive Services (Including Contraception Methods) That Must Be Provided Without Cost-Sharing

May 22, 2015

New guidance issued by the federal government clarifies what preventive care items and services must be covered, without cost-sharing, for compliance with the Affordable Care Act under an employer-sponsored group health plan. Of note, BRCA genetic testing must be covered if appropriate for women with a personal history of cancer, well-woman visits (including preconception and prenatal care) must be covered as appropriate for dependent children, and anesthesia performed in connection with a preventive colonoscopy must be covered, each without cost-sharing. In addition, a plan must cover, without cost-sharing, at least one form of contraception in each of the 18 FDA-approved methods. The coverage must include the clinical services and patient education and counseling needed for provision of the contraceptive method. Affordable Care Act Implementation FAQ Part XXVI is available **here**.