

Blue Cross Blue Shield Preventive Services Guide

Ford Salaried Active and Retiree



Preventive Service	Frequency/Limitations	Procedure Codes*
Physical Examinations		
Well adult –health maintenance exam (preventive/routine physical)	1 per calendar year	99385, 99395 – age 18 through 39 years 99386, 99396 –age 40 through 64 years 99387, 99397 – age 65 years and older
Well baby/child exam	-8 visits for children from birth to 12 months - 6 visits for children from 13 months – 23 months - 6 visits for children from 24 months – 35 months -2 visits for children from 36 months – 47 months -1 visit per calendar year age 4 years (48 months) through 17 years	99381, 99391 – Birth to 11 months 99382, 99392 – age 1 through 4 years 99383, 99393 – age 5 through 11 years 99384, 99394 – age 12 through 17 years
Other Screening Services - in conjunction with physical exam		
Chest x-ray	- 1 per calendar year in conjunction with physical exam	71020
EKG	- 1 per calendar year in conjunction with physical exam	93000, 93005, 93010, G0403, G0404 or G0405
Laboratory (blood tests) <i>Panels:</i> <ul style="list-style-type: none"> • Basic metabolic panel • General health panel • Electrolyte panel • Comprehensive metabolic panel <i>Chemistry:</i> <ul style="list-style-type: none"> • Albumin • Bilirubin • Calcium • Carbon dioxide • Chloride • Creatine kinase (CPK) • Creatinine • Glutamyltranfease (GGT) • Triglycerides <i>Hematology and Coagulation:</i> <ul style="list-style-type: none"> • Differential WBC • Microhematocrit • Hematocrit (HCT) • Hemoglobin (HGB) • Complete blood count (CBC) 	- 1 per calendar year in conjunction with physical exam <i>Panels:</i> <ul style="list-style-type: none"> • 80048 • 80050 • 80051 • 80053 <i>Chemistry:</i> <ul style="list-style-type: none"> • 82040 • 82247 • 82310 • 82374 • 82435 • 82550 • 82565 • 82977 • 84478 <i>Hematology and Coagulation:</i> <ul style="list-style-type: none"> • 85004 • 85013 • 85014 • 85018 • 85025, 85027, G0306 or G0307 	
Urinalysis	- 1 per calendar year in conjunction with physical exam	81000, 81001, 81002 or 81003
Other Laboratory Screening Services		
Lipid disorder screenings	-1 per calendar year - Men and women any age	80061, 82465, 83718, 83719 83721, 84478
Type 2 diabetes mellitus screening	- 2 per calendar year - Men and women any age	82947, 82950, 82951, 83036, 83037
Latent Tuberculosis Infection	-1 per calendar year - Men and women any age	86480, 86481, 86580

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Other Screenings		
High blood pressure screening	-1 per calendar year with diagnosis restrictions - Men and women any age	93784, 93786, 93788, 93790
High blood pressure monitor (Purchase or rental)	-1 per calendar year with diagnosis restrictions - Men and women 18 years and over	A4670
Lung cancer screening (Computerized Tomography (CT))	-1 per calendar year - Men and women 55 – 80 years	S8032, G0297
Infectious Disease Screening		
Chlamydia screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	86631, 86632, 87110, 87270, 87320, 87490, 87491, 87492, 87810
HIV/AIDS screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	86689, 86701, 86702, 86703, 87389, 87390, 87391, 87806, G0432, G0433, G0435, G0475
Syphilis screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	86592, 86593, 86780
Gonorrhea screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	87590, 87591, 87592, 87850
Hepatitis B screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	87340, 87341, G0499
Hepatitis C screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	86803, 86804, 87520, 87521, 87522, 87902, G0472
Herpes simplex virus (HSV) screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	86694, 86695, 86696
Human papillomavirus (HPV) screening	-1 per calendar year - Men and women any age; children age 11 – 21 years	87620, 87621, 87622, 87623, 87624, 87625, G0476
Newborn and Children's Health		
Adrenoleukodystrophy	- 1 per calendar year; birth to 60 days	82726
Congenital hypothyroidism	- 1 per calendar year; birth to 30 days	84443
Phenyketonuria (PKU) screening	- 1 per calendar year; birth to 30 days	84030
Mucopolysaccharidosis type I (MPS-i)/ Isovaleric academia	- 1 per calendar year; birth to 60 days	83864
Sickle cell disease screening	- 1 per calendar year; birth to 30 days	83020, 83021, 85660
Hematocrit/ Hemoglobin	- 4 months to 21 years old - 2 per calendar year	85014, 85018, 83026
Metabolic/Hemoglobin screening	- 1 per calendar year; birth to 60 days	S3620
Lead screening	-6 months to 6 years old -1 per calendar year	83655
Immune globulin (IgIV)	- 1 per calendar year; age 1 year and over	90283
Tuberculin test	- 1 per calendar year; age 1 month to 21 years old	86580
Dyslipidemia	-2 per calendar year; age 9 through 11 - 1 per calendar year; outside age 9 through 11	80061
Critical congenital heart disease screening	- 1 per calendar year; birth to 30 days	94760
Hearing loss screening	- 1 per calendar year; birth through 21 years	V5008, 92551
Visual impairment screening	-1 per calendar year -Children birth to 5 years	99172
Visual acuity screening	-1 per calendar year; Newborn to 21 years	99173
Developmental screening	-2 per calendar year -Children birth to 36 months	96110, 96127
Fluoride varnish	-2 per calendar year -Children birth through 5 years	99188
Topical gonorrhea prophylactic medication	- 1 per calendar year; birth to 30 days	N/A – billed as part of hospital stay

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Men's Health		
Prostate specific antigen (PSA)	-1 per calendar year - Men age 40 and over	84152, 84153, 84154, G0103
Digital rectal exam	-1 per calendar year - Men age 40 and over	G0102
Abdominal aortic aneurysm (AAA) ultrasound screening	-1 per calendar year - Men age 65-75 years	G0389
Women's Health		
GYN exam	-2 per calendar year -Women at any age	99383, 99384, 99385, 99386, 99387, 99393, 99394, 99395, 99396, 99397, G0101, S0610, S0612, S0613
Cervical cancer and dysplasia screening papanicolaou (PAP) smear	-1 per calendar year -Females at any age	88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88155, 88164, 88165, 88166, 88167, 88174, 88175, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001
Procurement of PAP smear	-1 per calendar year -Women at any age	Q0091
Mammogram- screening	-1 per calendar year -Women age 40 and over or at any age if at risk	G0202, G0204, G0206, 77055, 77056, 77057 Add-on codes: 77051, 77052
BRCA (breast and ovarian cancer hereditary gene analysis)	-Once per lifetime -Women any age	81211, 81212, 81213, 81214, 81215, 81216, 81217
Osteoporosis screening – bone density radiology	-1 per calendar year -Women age 65 and over or any age if at risk	X-Ray: 77078, 77079, 77080, 77081, 77082, 77083, G0130 Ultrasound: 76977
- Contraceptive Methods		
Non-biodegradable drug delivery implant, insertion and removal	- Unlimited with diagnosis restrictions - Women any age	11981, 11982, 11983
Removal, implantable contraceptive capsules	- Unlimited - Women any age	11976
Diaphragm or cervical cap fitting with instruction	- Unlimited - Women any age	57170
Cervical cap for contraceptive use	- Unlimited - Women any age	A4261
Diaphragm for contraceptive use	- Unlimited - Women any age	A4266
Insertion of IUD	- Unlimited - Women any age	58300
Removal of IUD	- Unlimited - Women any age	58301
Hysteroscopy/ Ligation or Transection/ Laparoscopy	- 1 per calendar year - Women any age	58565, 58600, 58605, 58611, 58615, 58670, 58671
Hysterosalpingography (HSG)	- 1 per calendar year when billed within 366 days of Hysteroscopy - Women any age	58340, 74740 (when concurrent with code 58565)
Transvaginal ultrasound	- 2 per calendar year with diagnosis restrictions - Women any age	76830
IUD Copper implant	- Unlimited - Women any age	J7300

Preventive Service	Frequency/Limitations	Procedure Codes*
- Contraceptive Methods (continued)		
Anesthesia for contraceptive surgeries	- 1 per calendar year - Women any age	00851
Permanent implantable contraceptive intratubal occlusion devices and delivery system	- 1 per calendar year - Women any age	A4264
Injection Medroxyprogesterone Acetate for contraceptive use (Depo Provera)	- Unlimited with diagnosis restrictions - Women any age	J1051, J1055 Administration: 96372
Levonorgestrel-releasing intrauterine contraceptive, or skyla	- 1 per calendar year - Women any age	J7297, J7298, J7301
Insertion of levonorgestrel-releasing intrauterine contraceptive, or skyla	- 1 per calendar year - Women any age	S4981
Etonogestrel implant system	- 1 per calendar year - Women any age	J7307
Contraceptive intrauterine device including implants and supplies	- 1 per calendar year - Women any age	S4989
Contraceptive supply – hormone with patch	- 3 per month/36 per year - Women any age	J7304
Contraceptive supply- hormone with vaginal ring	- 1 every 20 days - Women any age	J7303
- Breastfeeding Supplies		
Breast pump, electric	-One per pregnancy -Rental up to 10 months, then considered purchased -If purchased; allowed one every 24 months	E0603
Tubing for breast pump, replacement	-1 per calendar year	A4281
Adapter for breast pump, replacement	-1 per calendar year	A4282
Cap for breast pump bottle, replacement	-2 per calendar year	A4283
Breast shield and splash protector, replacement	-1 per calendar year	A4284
Polycarbonate bottle, replacement	-2 per calendar year	A4285
Locking ring, replacement	-1 per calendar year	A4286
Prenatal Services		
Prenatal (antepartum) visits	-3 visits or less with maternity diagnosis -Pregnant women any age	99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215
	-4 to 6 visits with maternity diagnosis	59425
	-7 or more visits with maternity diagnosis	59426
Prenatal Pediatrician Visit	- 2 per day/1 per calendar year -Pregnant women any age	T1027
Hepatitis B screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	87340, 87341, 80055
Asymptomatic bacteriuria (AB) screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	87086, 87088, 81007, 87081, 87084
Iron deficiency anemia screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	85025, 85027, 80055, 85013, 85014, 85018
Rh (d) incompatibility screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	86901, 80055

Preventive Service	Frequency/Limitations	Procedure Codes*
Prenatal Services (continued)		
HIV/AIDS screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	86701, 86702, 86703, 86689, 87390, 87391, G0432, G0433, G0435
Syphilis screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	86592, 86593, 86780, 80055
Gonorrhea screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	87850, 87590, 87591, 87592
Chlamydia screening	-2 per calendar year with maternity diagnosis -Pregnant women any age	86631, 86632, 87110, 87270, 87320, 87490, 87491, 87492, 87810
Colorectal Cancer Screening		
Colonoscopy	-1 per calendar year - Men and women any age	G0105, G0121, G6024, 0066T, 44388-44394, 44397, 45355, 45378 – 45388, 45391, 45392
Barium enema	-1 every 5 calendar years - Men and women age 50 and over	74270, 74280, G0106, G0120, G0122
Sigmoidoscopy	-1 per calendar year - Men and women any age	G0104, G0106, G6022, 45330, 45331, 45335, 45337 – 45342, 45345, 45346
Pathology microscopic exam (Biopsy) (associated with colorectal cancer screening)	-1 per calendar year - Men and women age 50 - 75 years	88304, 88305
Fecal occult blood test	-1 per calendar year; men and women age 50 and over (or at any age if risk factors present)	G0328, 82270, 82274
Immunizations		
General Immunizations: Adenovirus vaccine Anthrax vaccine Bacillus Calmette-Guerin vaccine (BCG) Cholera vaccine Diphtheria vaccines Hepatitis A vaccine Hepatitis A and B vaccine Hep B and Hib vaccine Hib vaccine HPV Japanese Encephalitis virus vaccine Measles virus vaccine Meningococcal vaccine MMR/ MMRV Mumps virus vaccine Plague vaccine Pneumococcal vaccine Poliovirus vaccine Rabies vaccine Rotavirus vaccine Rubella vaccine Tetanus vaccine Typhoid vaccine Varicella virus vaccine Yellow fever vaccine	-Follow CDC/Advisory Committee on Immunization Practices (ACIP) guidelines for age and frequency limitations: www.cdc.gov/vaccines/schedules/	General Immunizations: o 90476, 90477 o 90581 o 90585 o 90625 o 90696,90698,90700, 90702, 90715, 90719-21, 90723 o 90632, 90633, 90634 o 90636 o 90748 o 90645, 90646, 90647, 90648 o 90649, 90650, 90651 o 90738 o 90705, 90708 o 90620, 90621, 90644, 90733, 90734 o 90707/ 90710 o 90704 o 90727 o S0195, 90669, 90670, 90732 o 90712, 90713 o 90675 o 90680, 90681 o 90706 o 90703 o 90690, 90691, 90692, 90693 o 90716 o 90717

Preventive Service	Frequency/Limitations	Procedure Codes*
Immunizations (continued)		
Immunoglobulin Vaccines: Diphtheria antitoxin Hepatitis B immune globulin (HBIG) Immune globulin Rabies immune globulin (Rig-HT) Tetanus immune globulin (TIG) Zoster immune globulin		Immunoglobulin Vaccines: ○ 90296 ○ 90371 ○ 90281 ○ 90376 ○ 90389 ○ 90396
Influenza (Flu)	-1 per calendar year	Q2034, Q2035, Q2036, Q2037, Q2038, Q2039, 90630, 90653, 90654, 90655, 90656, 90657, 90658, 90660, 90661, 90662, 90672, 90673, 90674, 90685, 90686, 90687, 90688
Zoster – Shingles	-1 per lifetime -Age 60 and older	90736
Counseling Services		
Alcohol misuse screening and behavioral counseling interventions	- Unlimited with diagnosis restrictions - Men and women any age	99408, 99409, G0396, G0397, G0442, G0443
Alcohol and drug use assessment	-1 per calendar year -Men and women any age; children 11 to 21 years	G0442, G0443
BRCA genetic counseling	-8 times per day equivalent to 2 hours per day - 2 times per calendar year - Women any age	S0265
Breastfeeding counseling	- 2 or 5 each per calendar year - Women any age	99401, 99402 – up to twice per year 99403, 99404 – up to once a year
Diet/nutrition counseling	-6 per calendar year with diagnosis restrictions - Men, women and children any age	97802, 97803, 97804, G0270, G0271, S9470
Face to face behavioral counseling for obesity	- 15 minutes; 26 per calendar year; diagnosis restrictions - 30 minutes; 12 per calendar year; diagnosis restrictions -Men, women and children any age	G0447, G0473
Tobacco use counseling	- Unlimited with diagnosis restrictions - Men and women any age	99406, 99407, 99441, 99442, 98966, 98967, G0436, G0437
Depression screening	-1 per calendar year -Men, women and children any age	G0444
Counseling for aspirin for the prevention of cardiovascular disease	- 1 per calendar year - Men and women 50 – 69 years	G0446
Sexually transmitted infection counseling	-2 routine and 2 maternity per calendar year - Men, women and children any age	G0445
Obesity counseling for glucose monitoring	- 12 or 26 per calendar year - Men, women and children any age	G0447, G0473
Domestic violence counseling	- 5 each per calendar year - Women at any age	99401, 99402 – up to twice per year 99403, 99404 – up to once a year
Counseling for contraceptive use	-5 each per calendar year -Women at any age	99401, 99402

*This is intended as an easy-to-read summary and provides only a general overview of your preventive benefits. This is not an all inclusive list. Additional restrictions, including diagnosis, location and provider type, may apply to all listed services. **For a complete description of benefits, please contact the customer service number on the back of your ID card.** Providers should contact their local plan to discuss billable procedure codes in accordance to their plan's guidelines.*

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