Overview

Preventive health services refers to health care that focuses on disease (or injury) prevention. Preventive health also assists the provider in identifying a patient’s current or possible future health care risks through assessments, lab work and other diagnostic studies.

The U.S. Preventive Services Task Force (USPSTF) is an independent, volunteer panel of national experts in prevention and evidence-based medicine authorized by the U.S. Congress. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services. Each recommendation is a letter grade (an A, B, C or D grade or an I statement) based on the strength of the evidence and the balance of benefits and harms of a preventive service. For more information, visit https://www.uspreventiveservicestaskforce.org/Page/Name/grade-definitions.

Policy


Preventive Services can be found in MSM Chapter 600-Physician Services; Section 606 Preventive Health Services (MSM 600).

Covered Services

Nevada Medicaid reimburses for preventive medicine services for men, women and children as recommended by the USPSTF A & B recommendations. The description of the recommendation is the criteria that must be followed for the service to be covered.

For the most current list of reimbursable preventive services, please see USPSTF A and B Recommendations as it is subject to change; recommendations are evidence-based and research is conducted for new recommendations regularly.

Non-covered Services

Preventive Services not catalogued or current as either an A or B Recommendation by the USPSTF are not covered.

Prior Authorization (PA)

PAs are not required for Preventive Services that coincide with the USPSTF A and B Recommendations.

Billing Requirements or Instructions

Many of the screening tests may be performed as part of an office visit, hospital visit or global fee and may not be billed separately.

Visit the USPSTF site for information and tools for Primary Care Providers.