

## **PREVENTIVE HEALTH SERVICES INCLUDING PREVENTIVE HEALTH SERVICES COVERAGE FOR HIV PREEXPOSURE PROPHYLAXIS (PREP)**

Under the Affordable Care Act (ACA), non-grandfathered group health plans and insurers must provide coverage for certain in-network preventive health services and cannot require participants and beneficiaries to share the cost of these services through copayments, coinsurance, or deductibles. Although these in-network preventive care benefits are disclosed and discussed in your booklet-certificate issued by Nippon Life Benefits, in the interest of improving your awareness of the ability to access in-network preventive care benefits without the barrier of cost, we are providing this summary document.

- Pursuant to the federal Public Health Service Act coverage of specified in-network health services, including services which have received an “A” or “B” grade recommendation from the U.S. Preventative Services Task Force (USPSTF), will be covered by Nippon Life Benefits without the imposition of cost sharing or cost sharing measures. Cost sharing, or cost sharing measures, include deductibles, copayments and coinsurance requirements.
- In addition to USPSTF grade “A” and “B” recommendations, applicable health services include: immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) of the CDC for routine use in children, adolescents and adults; and preventative care and screenings for infants, children, adolescents and women as identified in the Health Resources and Services Administration (HRSA) comprehensive guidelines.
- If a recommendation or guideline does not specify the frequency, method, treatment, or setting for the provision of a recommended preventative service, Nippon Life Benefits reserves the right to apply reasonable medical management techniques to determine any coverage limitations. We will accommodate any individual when their health care provider has determined that a particular medication would be medically inappropriate by waiving the otherwise applicable cost sharing provisions. Members who are seeking such an accommodation may contact Nippon Life Benefits via 800-374-1835.
- Additionally, federal law requires that USPSTF recommendations relating to breast cancer screenings, mammography and prevention issued before 2009 remain in effect until January 1, 2023. If the USPSTF changed a recommendation grade to an “A” or “B” for one of the aforementioned health services after November 30, 2009, the relevant grade will be considered not in effect and the specified service may be subject to cost sharing provisions.
- All qualifying coronavirus preventative services will also not be subject to cost sharing provisions. These include evidence based services graded as “A” or “B” by the USPSTF and ACIP recommended immunizations regardless of whether they have been recommended for routine use, which are intended to prevent or mitigate SARS-CoV-2 (COVID-19).

- A full list of USPSTF and ACIP recommended health services, as well as HRSA guidelines, can be found at the following websites:
  - USPSTF: <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-and-b-recommendations>
  - ACIP: <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/index.html>
  - Pediatric HRSA Guidelines: [https://www.hrsa.gov/advisory-committees/heritable\\_disorders/rusp/index.html](https://www.hrsa.gov/advisory-committees/heritable_disorders/rusp/index.html)
  - Women HRSA Guidelines: <https://www.hrsa.gov/womens-guidelines/index.html>
- In accordance with statutory law PrEP drugs will not be subject to cost sharing in our prescription drug formularies. Therefore, we will cover PrEP drugs and necessary services without applying cost sharing provisions when the drugs are prescribed by an individual's attending health care provider and delivered by an in-network health care provider or obtained at an in-network pharmacy (regardless of sex assigned at birth, recorded gender, or gender identity). We will not apply coverage limits to PrEP drugs or necessary services inconsistent with the CDC's most recently updated clinical guidance, nor will we require prior authorization or step therapy for any PrEP drug. PrEP drug coverage includes prescription drugs approved by the Food and Drug Administration and recommended for HIV PrEP by the CDC. Covered "necessary services" include those medically necessary for HIV PrEP initiation and follow-up care as recommended by the USPSTF and further specified by the CDC's most recently updated clinical guidance and determined by a person's attending health care provider, including but not limited to: provider office and telehealth visits for prescribing and medication management; HIV testing; kidney function testing; serologic testing for hepatitis B and C viruses; hepatitis B vaccination; testing for other sexually transmitted infections, including 3-site testing for gonorrhea and chlamydia; pregnancy testing; and ongoing follow-up and monitoring every three months.

PrEP initiation services may be provided prior to the prescription of anti-retroviral medication. Please see Q1, Q2 and Q3 of <https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/FAQs-Part-47.pdf> for more information regarding the foregoing.

Members with questions or inquiries regarding any of the above mentioned information or provisions can contact us at 800-374-1835.

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