

ADULT PREVENTIVE SERVICES

Adult Preventive Health Services is defined as: “primary, secondary, and tertiary preventive measures provided to individuals in a clinical setting. Primary preventive measures are those provided to individuals to prevent the onset of a targeted condition (e.g. routine immunization of healthy individuals). Secondary preventive measures are those that identify and treat asymptomatic persons who have already developed risk factors or pre-clinical disease but in whom the condition has not become clinically apparent. Tertiary preventive measures are those that are part of the treatment and management strategy of persons with clinical illnesses that can prevent sequelae.”

CenCal Health recommends that PCPs or Attending Physicians make available a core set of preventive services consistent with the Guide to Clinical Preventive Services, a report of the United States Preventive Services Task Force (USPSTF) which is available in summary form at <http://www.uspreventiveservicestaskforce.org/adultrec.htm>. Copies of individual guidelines are also available from CenCal Health upon request.

The Adult Initial and Periodic Preventive Medicine services are not Medi-Cal benefits, but are CenCal Health -only benefits, and are also paid on a fee-for service basis at a rate established by CenCal Health. CPT codes for these Preventive Medicine services are: 99385, 99386, 99387, 99395, 99396, & 99397. The fee-for-service payment rates for these Periodic Preventive Medicine services are set forth in the Agreement in Exhibit A, Section 5.6, and are subject to annual review and change. Most routine screenings (i.e visual acuity screening) are included in the preventive care exam and are not separately billable. To determine whether a particular screening test is separately billable, please contact your CenCal Health Claims Representative.

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