

TRICARE OVERSEAS PROGRAM (TOP) PRIME - CLINICAL PREVENTIVE SERVICES

ISSUE DATE: September 20, 1996

AUTHORITY: [32 CFR 199.17](#)

I. POLICY

A. There is no preauthorization or referral required for the following services. Verification of codes is not required for payment of enhanced services under the TRICARE Overseas Program (TOP).

B. There shall be no co-payments associated with the individually TRICARE/CHAMPUS reimbursable services listed below. The contractor need not establish additional edits to identify claims within the age, sex, race or clinical history perimeters included below:

SERVICES	FREQUENCY OR AGE INTERVAL	RELEVANT CPT ¹ CODE
SCREENING EXAMINATIONS:		
COMPREHENSIVE HEALTH PROMOTION AND DISEASE PREVENTION EXAMINATIONS	For ages 24 months or older: One comprehensive disease prevention clinical evaluation and follow up during age intervals: 2-4; 5-11; 12-17; 18-39; 40-64.	99382-99386 99392-99396
TARGETED HEALTH PROMOTION AND DISEASE PREVENTION EXAMINATIONS	The following screening examinations may be performed during either the above periodic comprehensive health promotion examination or as part of other patient encounters. The intent is to maximize preventive care.	
School Physicals:	Physical Examinations: For beneficiaries ages 5 through 11 that are required in connection with school enrollment as of October 30, 2000.	99201-99205*, 99211-99214*, 99383 and 99393

¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

SERVICES	FREQUENCY OR AGE INTERVAL	RELEVANT CPT ¹ CODE
School Physicals: (Continued)	NOTE: Standard office visit evaluation and management CPT ¹ procedure codes (i.e., code ranges 99201-99205 and 99211-99214) may be used in billing for school physicals; however, payment may not exceed what would have otherwise been reimbursed under the comprehensive preventive medicine service codes for beneficiaries ages 5 through 11 (CPT ¹ procedure codes 99383 & 99393).	
Breast Cancer:	Physical Examination: For women under age 40, physicians may elect to perform clinical breast examination for those who are at high risk, especially those whose first-degree relatives have had breast cancer diagnosed before menopause. For women age 40 and older, annual clinical examinations should be performed.	See codes for comprehensive health promotion and disease prevention exam.
	Mammography: Baseline mammogram age 40; every two years age 40-50, annually age 50 and over; For high risk women (family history of breast cancer in a first degree relative), baseline mammogram age 35, then annually.	76092, HCPCS G0202, G0203
Cancer of Female Reproductive Organs:	Physical Examination: Pelvic examination should be performed in conjunction with Pap smear testing for cervical neoplasms and premalignant lesions.	See codes for comprehensive health promotion and disease prevention exams.
	Papanicolaou smears: Annually starting at age 18 (or younger, if sexually active) until three consecutive satisfactory normal annual examinations. Frequency may then be less often at the discretion of the patient and clinician but not less frequently than every three years.	88141-88147, 88148, 88150, 88152-88155, 88164, 88165-88167, 99201-99215 or 99301- 99313.
Testicular Cancer:	Physical Examination: Clinical testicular exam annually for males age 13-39 with a history of cryptorchidism, orchiopexy, or testicular atrophy.	See codes for comprehensive health promotion and disease prevention exams.

¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

SERVICES	FREQUENCY OR AGE INTERVAL	RELEVANT CPT ¹ CODE
Colorectal Cancer:	Physical Examination: Digital rectal examination should be included in the periodic health examination of individuals 40 years of age and older.	See codes for comprehensive health promotion and disease prevention exams.
	Fecal occult blood testing: Annually 50 and over if at increased risk for colorectal cancer.	82270
	Proctosigmoidoscopy or Sigmoidoscopy: Once every 3-5 years beginning at age 50.	45300 and 45330.
	Colonoscopy: Performed every five years beginning age 40 for individuals at increased risk for colon cancer with first degree relative with a history of colon cancer.	45355 and 45378.
Skin Cancer:	Physical Examination: Skin examination should be performed for individuals with a family or personal history of skin cancer, increased occupational or recreational exposure to sunlight, or clinical evidence of precursor lesions.	See codes for comprehensive health promotion and disease prevention exams.
Oral Cavity and Pharyngeal Cancer:	Physical Examination: A complete oral cavity examination should be part of routine preventive care for adults at high risk due to exposure to tobacco or excessive amounts of alcohol. Oral examination should also be part of a recommended annual dental check-up.	See codes for comprehensive health promotion and disease prevention exams.
Thyroid Cancer:	Physical Examination: Palpation for thyroid nodules should be performed in adults with a history of upper body irradiation.	See codes for comprehensive health promotion and disease prevention exams.
Infectious Diseases:	Tuberculosis screening: Screen annually, regardless of age, all individuals at high risk for tuberculosis.	86580 and 86585

¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

SERVICES	FREQUENCY OR AGE INTERVAL	RELEVANT CPT ¹ CODE
Infectious Diseases: (Continued)	Rubella antibodies: Females, once, age 12-18, unless documented history of adequate rubella vaccination with at least one dose of rubella vaccine on or after the first birthday.	86762
	Hepatitis B screening: Screen pregnant women for HBsAG during prenatal period.	87340
Cardiovascular Diseases:	Cholesterol: Non-fasting total blood cholesterol: At least once every five years, beginning age 18.	80061
	Blood pressure screening: For children: Annually between 3 and 6 years of age, and every 2 years thereafter. For adults: A minimum frequency of every two years.	See codes for comprehensive health promotion and disease prevention exams.
Other:	Body Measurement: For children: Height and weight should be measured regularly throughout infancy and childhood. Head circumference should be measured through age 24 months. For adults: Height and weight should be measured periodically. The optimal frequency is a matter of clinical discretion. Those individuals who are 20% or more above desirable weight should receive appropriate nutritional and exercise counseling.	See codes for comprehensive health promotion and disease prevention exams.
	Vision Screening: Pediatric vision screening at birth and approximately 6 months of age to include determination of vision on visual acuity, ocular alignment and red reflex, along with external examination of ocular abnormalities. Comprehensive eye examination once every 2 years for all TRICARE Prime enrollees between the ages of 3 and 64 years of age. Diabetic patients, at any age, should have comprehensive eye examinations at least yearly.	92002, 92004, 92012, 92014, 92015, 99172, and 99173.

¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

SERVICES	FREQUENCY OR AGE INTERVAL	RELEVANT CPT ¹ CODE
Other (Continued):	NOTE: Comprehensive eye examinations are meant to be more than the standard visual acuity screening test conducted by the member's primary care physician through the use of a standard Snellen wall chart. Self-referral will be allowed for preventive vision screening since PCMs are incapable of providing comprehensive eye examinations; i.e., a prime beneficiary will be allowed to set up his or her own appointment for a comprehensive eye examination with either an optometrist and/or ophthalmologist.	
	Hearing screening: For children: All high risk neonates audiology screening before leaving the hospital. If not tested at birth, high-risk children should be screened before three months of age. Evaluate hearing of all children as part of routine examinations and refer those with possible hearing impairment as appropriate.	92551, 92587, and 92588
	Pediatric Blood Lead: Assessment of risk for lead exposure during each well child visit from age six months through 6 years. Screening by blood lead level determination for all children at high risk for lead exposure.	83655
COUNSELING SERVICES:		
These are expected components of good clinical practice that are integrated into the appropriate office visit at no additional charge.	Patient & parent education counseling: Dietary Assessment & Nutrition; Physical Activity & Exercise; Cancer Surveillance; Safe Sexual Practices; Tobacco, Alcohol and Substance Abuse; Accident & Injury Prevention; Promoting Dental Health; Stress, Bereavement, & Suicide Risk Assessment.	These are expected components of good clinical practice that are integrated into the appropriate office visit at no additional charge.
¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.		

SERVICES	FREQUENCY OR AGE INTERVAL	RELEVANT CPT ¹ CODE
IMMUNIZATIONS:		
	By age appropriate dose of vaccine for the following diseases according to the current immunization recommendations: Tetanus, Diphtheria, Pertussis, Poliomyelitis, Mumps, Measles, Rubella, Influenza, Pneumococcal Disease, Haemophilus Influenza Type B, Hepatitis A, Hepatitis B, and Varicella.	90585-90586, 90632-90665, 90669-90680, 90700-90748 except 90717, 90723, 90725, 90727, 90733, and 90735.

¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

- END -