VERMONT MEDICAL SOCIETY RESOLUTION – PROPOSED

Aligning Coverage for Preventive Screenings with United States Preventive Services Task Force Guidelines

WHEREAS, high-quality preventive care helps patients stay healthy; avoid or delay the onset of illness, chronic disease and cancer; and reduce overall health care costs; and

WHEREAS, the Affordable Care Act (ACA) has prioritized population health and expanded access to preventive care by requiring that all insurers provide preventive services without cost sharing and by expanding access to coverage that included these preventive services; and

WHEREAS, under the ACA, most private insurance plans are required to cover evidence-based preventive services that have a rating of A or B in the current recommendations of the U.S. Preventive Services Task Force (USPSTF);¹ and

WHEREAS, the USPSTF reviews all recommendations every 5 years for either an update or reaffirmation; and

WHEREAS, Vermont statutes do not change when USPSTF changes their recommendations, for example, when ages for preventive screenings are lowered; and

WHEREAS, in 2021 the USPSTF lowered the age recommendation for patients to be screened for colorectal cancer from 50 to 45 under a “B” rating;² and

WHEREAS, current Vermont statute requires Vermont insurance carriers to provide an insured 50 years or older with coverage for colorectal cancer screenings;³ and

WHEREAS, having details of specific screening recommendations in Vermont statute can become outdated and create inconsistencies with federal screening guidelines, therefore, be it:

RESOLVED, the Vermont Medical Society will continue to advocate for the elimination of copays and deductibles for nationally-recommended preventive services; and

RESOLVED, that the Vermont Medical Society will urge the Vermont legislature, along with Vermont regulators and insurance carriers, to require coverage for all preventive screenings:

• to follow at a minimum, the Unites States Preventive Services Task Force screening recommendations, rather than include overly-specific age or other eligibility requirements; and,

• to be, at a minimum, as comprehensive as those provided by the Affordable Care Act.

³ https://legislature.vermont.gov/statutes/section/08/107/04100g