

April 16, 2024

Division of Financial Regulation
Department of Consumer and Business Services
350 Winter St NE
Fourth Floor
Salem, OR 97301
Attn: Brooke Hall

Subject: Providence Health Plan comment on Rulemaking Well-Women RAC

Providence Health Plan (PHP) offers this comment to support the Department of Consumer and Business Services' (DCBS) Division of Financial Regulation (DFR) efforts to revise rules to define health insurance coverage requirement for Well-Woman care.

We support the Department's efforts to incorporate, with version control, HRSA recommendations into Oregon rules. We also encourage the Department to adopt a definition of "screening" that will apply to the interpretation of those recommendations. Such a definition should provide needed clarity to distinguish a screening from other forms of care. Specifically, we recommend that the Department define "screening" in rule to be "Health care services or products provided to an individual without apparent signs or symptoms of an illness, injury, or disease for the purpose of identifying or excluding an undiagnosed illness, disease, or condition." This same definition has been adopted by the American Medical Association for the purpose of interpreting the Affordable Care Act, related rules, and related guidance or recommendations for providers.¹

The Affordable Care Act uses several times the term "screening" without defining the term. Most relevant to the Department's current rulemaking is the ACA's requirement that group and individual health plans provide, without cost share, "with respect to women, such additional preventive care and screenings . . . as provided for in comprehensive guidelines supported by the Health Resources and Services Administration for purposes of this paragraph."²

¹ American Medical Association, Definitions of "Screening" and "Medical Necessity" H-320.953, available at [Policy Finder | AMA \(ama-assn.org\)](https://www.ama-assn.org/policy-finder)

² 42 U.S.C. 300gg-13 (ACA Sec. 2713) (a)(4).

To support providers who offer these services to patients, the American Medical Association developed the definition cited above and recommended by Providence Health Plan for use in the current rulemaking.

Other federal entities have developed like definitions, or have demonstrated like understanding, of the term. Consistent among the definitions is a distinction between preventive care prior to the onset of symptoms as opposed to diagnosis and treatment of symptoms:

The Health Resources & Services Administration, tasked under the ACA with developing preventive care guidelines³, describes screenings as “preventive health care.”⁴ Indeed, HRSA’s recommended screenings for women are within *HRSA-Supported Women’s Preventive Services Guidelines*. Further, HRSA distinguishes between a well-woman visit and sick visit, indicating that “A well-woman visit focuses on promoting and maintaining health over the course of a woman’s lifetime through preventive health care, and a sick or problem visit focuses on diagnosis and treatment of new or existing symptoms or problems.”⁵

The Office of Diseases Prevention and Health Promotion, within the U.S. Department of Health and Human Services, indicates that “Screenings are medical tests that doctors use to check for disease and health conditions before there are any signs or symptoms.”⁶

The Occupational Safety and Health Administration makes the same distinction with their definition. “Medical screening is a method for detecting disease or body dysfunction before an individual would normally seek medical care. Screening tests are usually administered to individuals without current symptoms, but who may be at high risk for certain adverse health outcomes.”⁷

The Centers for Disease Control and Prevention makes a similar distinction, with colloquial language, to a public audience wherein they encourage Americans to receive preventative care, such as “Screening tests, which are medical tests to check for diseases early, when they may be

³ 42 U.S.C. 300gg-13 (a)(4).

⁴ See [Women’s Preventive Services Guidelines | HRSA](#), paragraph 2 “Under the ACA, most private health insurers must provide coverage of women’s preventive health care – such as mammograms, screenings”

⁵ [WPSI-WellWomanChartFAQ-092618-v2.pdf \(womenspreventivehealth.org\)](#), *WHAT IS THE DIFFERENCE BETWEEN A WELL-WOMAN VISIT AND A SICK VISIT?*

⁶ [Get Screened - MyHealthfinder | health.gov](#)

⁷ [Medical Screening and Surveillance - Medical Screening | Occupational Safety and Health Administration \(osha.gov\)](#)

easier to treat.”⁸ Further stating, “Cancer screening means checking your body for cancer before you have symptoms.”⁹

In order to bring clarity to the Department’s rulemaking, Providence encourages the Department to adopt a definition for “screening” that mirrors the understanding communicated by a variety of federal agencies, as described above. In order to maintain consistency with the provider community, we encourage the Department to specifically adopt the definition developed by the American Medical Association.

We appreciate the Department’s time and consideration of our recommendation. Please, kindly, reach out should questions arise.

Kind regards,
Tara Harrison
Government Affairs Director
Providence Health Plan
Tara.Harrison@Providence.org

⁸ [Are You Up to Date on Your Preventive Care? | CDC](#)

⁹ *Id.*