



WPSI Well–Woman Chart

FREQUENTLY ASKED QUESTIONS

The [Women's Preventive Services Initiative \(WPSI\)](#) is a 5-year cooperative agreement led by the American College of Obstetricians and Gynecologists (ACOG). ACOG is engaging a coalition of national health professional organizations and consumer and patient advocates with expertise in women's health across the life span to develop, review, and update recommendations for women's preventive health care services, including women's preventive services guidelines sponsored by the Health Resources and Services Administration.

*For this FAQ, the Women's Preventive Services Initiative's (WPSI) [Recommendations for Well-Woman Care—a Well-Woman Chart](#) will be referred to as the Well-Woman Chart.

WHAT IS A WELL–WOMAN VISIT?

A well-woman visit, often referred to as a wellness visit, regular checkup, or periodic health examination, is a clinical encounter that promotes health over the course of a woman's lifetime through preventive health care.¹ Well-woman preventive services may include, but are not limited to: assessment of physical and psychosocial function, primary and secondary prevention and screening, risk factor assessments, immunizations, counseling, education, prepregnancy care, and many services necessary for prenatal and interpregnancy care.^{2,3} "The selection of a health care provider for the well-woman visit will be determined by the woman's needs and preferences, access to health services, plan, and age category."¹ A well-woman visit may be conducted over one visit or over numerous encounters.¹

WHAT IS THE DIFFERENCE BETWEEN A WELL–WOMAN VISIT AND A SICK VISIT?

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.

WHAT IS THE GOAL OF THE WELL–WOMAN CHART?

The Well-Woman Chart is designed as a tool and a starting point for providing well-woman care and implementing the WPSI-recommended [well-woman preventive visits](#). The chart should be adapted as necessary to meet a woman's needs.

DOES THE WELL–WOMAN CHART ONLY COVER WPSI RECOMMENDATIONS?

No, the Well-Woman Chart is a compilation of preventive service recommendations for women from the [WPSI](#), U.S. Preventative Services Taskforce ([USPSTF](#)), and [Bright Futures](#).

IS THE WELL–WOMAN CHART A STAND–ALONE DOCUMENT?

No, the Well-Woman Chart includes corresponding [clinical summaries](#) with the appropriate age and frequencies in which the preventive services should be performed, considerations for clinical practice, and any relevant risk assessments.

HOW IS THE WELL–WOMAN CHART STRUCTURED?

The Well-Woman Chart is a summary chart of preventive services recommendations for women from the [WPSI](#), the [USPSTF](#), and [Bright Futures](#). The chart is separated by age group, and services are broken into the categories of general health, infectious diseases, and cancer. These services are also listed in alphabetical order for ease of use. When the recommendations overlap between the various groups, the chart uses the most inclusive recommendation. Recommendations from the [WPSI](#) and the [USPSTF](#) for preventive services for pregnant and postpartum women are also provided in the Well-Woman Chart.

WHO SHOULD BE USING THE WELL–WOMAN CHART?

The Well-Woman Chart can be used by any health care provider who is providing preventive well-woman care, including family physicians, internists, ob–gyns, physician assistants, nurse practitioners, and certified nurse–midwives.

HOW DO I ACCESS THE WELL–WOMAN CHART?

The Well-Woman Chart and its accompanying clinical summaries can be found on the [WPSI website](#).

MY ORGANIZATION'S GUIDELINES CONFLICT WITH THE RECOMMENDATIONS IN THE WELL–WOMAN CHART. WHAT DO I DO?

Please defer to your clinical institutional authority in the event of conflicting guidance.

DO WOMEN NEED A WELL-WOMAN VISIT EVERY YEAR?

The [WPSI](#) recommends that women receive at least one preventive care visit per year beginning in adolescence and continuing across the life span to ensure that the recommended preventive services are obtained.

HOW DO I PRIORITIZE WELL-WOMAN EXAM SERVICES IN THE TIME ALLOTTED FOR EACH WOMAN?

Each woman is unique, as are her health care needs. Decisions regarding when to initiate screening, how often to screen, and when to stop screening should be based on a periodic shared decision-making process involving the woman and her health care provider. The shared decision-making process assists women in making an informed decision and includes, but is not limited to, a discussion about the benefits and harms of screening; an assessment of the woman's values and preferences; and consideration of factors such as life expectancy, comorbidities, and health status.²

DO I NEED TO DO ALL THESE SERVICES IN ONE VISIT?

The services listed in the Well-Woman Chart should not be viewed as what is expected to be performed at every well-woman visit by every health care provider. Additional well-woman visits may be needed to obtain all necessary services depending on a woman's age, health status, reproductive health needs, pregnancy status, and risk factors.

WHAT ABOUT HEALTH INSURANCE COVERAGE?

All recommendations listed on the Well-Woman Chart include clinical preventive services that most private insurance plans and many Medicaid state programs cover without cost-sharing as required by the Affordable Care Act. For more information about federal coverage requirements for preventive services, refer to [healthcare.gov](#) and your insurance carrier.

DO YOU HAVE ANY RESOURCES TO ASSIST WITH BILLING?

The American College of Obstetricians and Gynecologists ([ACOG](#)) offers [coding resources](#). You can also submit coding questions to the ACOG coding team through our [Coding Ticket Database](#). This resource is available to both ACOG members and nonmembers.

WHAT ABOUT IMMUNIZATIONS?

Immunizations should be administered according to the [most recent ACIP recommendations](#).

REFERENCES

1. Conry, Brown. Well-Woman Task Force: Components of the Well-Woman Visit. *Obstetrics & Gynecology* 2015; 126: 697-701. https://journals.lww.com/greenjournal/Fulltext/2015/10000/Well_Woman_Task_Force__Components_of_the.2.aspx
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3. Well-woman visit. ACOG Committee Opinion No. 755. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2018;132:e181-86. https://journals.lww.com/greenjournal/Fulltext/2018/10000/ACOG_Committee_Opinion_No__755_Summary__57.aspx
4. U.S. Department of Health and Human Resources Women's Preventive Services Guidelines. <https://www.hrsa.gov/womens-guidelines-2016/index.html>. Accessed August 15, 2018.

Members of the advisory panel support WPSI



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FOUNDATION

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This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under a cooperative agreement (UH0MC29440).

