

Preventive Health Guidelines

Guide to Clinical Preventive Services - Children and Adolescents

LifeWise has adopted the United States Preventive Services Task Force (USPSTF) *Guide to Clinical Preventive Services*. Each of the preventive services included in the guideline is a service that the USPSTF recommends clinicians discuss with eligible patients/parents and offer as a priority. All services listed have received an “A” or “B” grade unless otherwise noted,* which means there is a moderate to high certainty that these services have a net benefit that is substantial or moderate.

Immunizations are part of the USPSTF recommendations for Preventive Health Services. LifeWise recommends following the [immunization schedule](#) from the Centers for Disease Control and Prevention (CDC) and Advisory Committee on Immunizations Practices (ACIP).

The Institute for Clinic Systems Improvement (ICSI) *Health Care Guideline: Preventive Services for Children and Adolescents* is another source of LifeWise’s recommendations for child preventive services. ICSI has prioritized preventive services and grouped them based on evidence of effectiveness, health impact and cost-effectiveness. Only Level I and II preventive services are included in the guideline unless otherwise noted.

In addition, LifeWise recommends use of the comprehensive guidelines for infants, children and adolescents supported by Federal Healthcare Reform and Health Resources and Services Administration (HRSA): *The Periodicity Schedule of the Bright Futures Recommendations for Pediatric Preventive Health Care*, and *The Uniform Panel of the Secretary’s Advisory Committee on Heritable Disorders in Newborns and Children*.

All USPSTF services rated as A or B are covered in full in accordance with federal healthcare reform or are covered at a reduced out-of-pocket cost for members who are enrolled in grandfathered plans. **Please verify benefits** by checking our website or calling the LifeWise Customer Service number listed on the back of the patient’s ID card.

This guideline was reviewed and approved by LifeWise’s Clinical Quality Improvement Committee as a resource for providers who treat our members. **Although the guidelines reflect national recommendations, they are not a substitute for the clinical judgment of practitioners advising and caring for individual patients.** LifeWise reviews and updates practice guidelines at least every two years. The committee’s composition reflects various medical specialists and geographic regions served by LifeWise.

Recommended Child and Adolescent Preventive Services

All recommended USPSTF services rated as A or B are covered in full in accordance with federal healthcare reform.

Recommended Periodic Health Visits

0 to 2 years	2-7 days; 2, 4, 6, 9, 12, 15, 18, and 24 months of age and ACIP immunizations.
3 to 6 years	1 visit per calendar year and ACIP immunizations.
7 to 18 years	Every 1-2 years and ACIP immunizations.

Recommended Screening Exams

Alcohol and Drug Use

Adolescents	Screen during routine physical exam.
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Asymptomatic Bacteriuria

Pregnant persons	Screen persons who are pregnant for asymptomatic bacteriuria with a urine culture.
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Cervical Cancer Screening (PAP only)

Women younger than 21	Do not screen for cervical cancer.
Women 21 to 29	Screen for cervical cancer every 3 years with cytology alone.

Depression Screening

Adolescents	Screen for major depressive disorder (MDD) in adolescents aged 12 to 18 years. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow up.
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Dental Caries Prevention

Infants and children up to age 5 years	Apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption in primary care practices, recommending primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is fluoride deficient.
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Hearing

Newborns	Screen for hearing loss in all newborn infants.
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Hepatitis B Screening

Non-pregnant Adolescents	Screen for hepatitis B virus infection in persons at high risk for infection.
Pregnant women	Screen for Hepatitis B virus (HBV) infection using HBsAg at first prenatal visit. Screen regardless of previous HBV vaccination or previous negative HBsAg test results.

Hepatitis C Virus Infection (HCV) Screening

Adolescents and Adults 18-79 years	Screen all asymptomatic adults (including pregnant persons) 18 to 79 without known liver disease. Also: screen persons younger than 18 years and older than 79 years who are at high risk for infection (e.g., those with past or current injection drug use)
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HIV Infection Counseling and Screening

Non-pregnant adolescents	Screen adolescents (and adults) ages 15-65 years. Screen younger adolescents (and older adults) at increased risk for HIV infection.
Pregnant persons	Screen for HIV infection in all pregnant persons, including those who present in labor or at delivery whose HIV status is unknown.

Iron Supplementation		
	6 to 12 months	Routine iron supplementation for asymptomatic children aged 6 to 12 months who are increased risk for iron deficiency anemia.
Neonatal Screening		
	Newborns	Newborn metabolic screening performed prior to hospital discharge > 24 hours of age; gonorrhea prophylactic medication; sickle cell, PKU and congenital hypothyroidism screening.
Obesity Screening		
	Children and adolescents 6 years and older	Record height, weight and BMI annually. Screen for obesity in children and adolescents 6 years and older and offer or refer them to comprehensive, intensive behavioral interventions to promote improvements in weight status.
Scoliosis Screening		
	Children and Adolescents	Children and adolescents presenting for evaluation of back pain or obvious deformities in spinal curvature, screen for scoliosis.
Syphilis Screening		
	Non-pregnant Adolescents	Screen for syphilis infection in persons who are at increased risk for infection.
	Pregnant women	Early screening for syphilis infection in all pregnant women.
Tobacco Use Screening		
	Adolescents	Establish tobacco use and secondhand exposure.
Intimate Partner Violence (IPV)		
	Women of reproductive age	Screen for IPV and provide or refer screen-positive women to ongoing support services.
Visual Screening		
	Children ages 3 to 5 years	Vision screening at least once in all children ages 3 to 5 years to detect amblyopia or its risk factors.
Counseling		
Helmet Use		
	2 years and older	Wear an approved safety helmet for high-risk activities, such as bicycling ⁴ , in-line skating, skateboarding, skiing, snowboarding, high-contact sports, and riding a horse, motorcycle, ATV, mini-bike, or snowmobile.
Infant Sleep Positioning and SIDS		
	0 to 2 years	Place infants on their back to sleep.
Motor Vehicle Safety		
	0 to 2 years	Car seat when riding in a motor vehicle. Rear facing until 1 year and 20 pounds.
	2 years and older	Car seat/booster seat/seat belt when riding in a motor vehicle.
Obesity Counseling		
	6 years and older	Refer patients to comprehensive or behavioral interventions to promote improved weight status. Counseling covered up to 4 visits per calendar year.
Skin Cancer Prevention: Behavioral Counseling		
	Persons aged 6 months to 24 years, and parents of young children	Counsel young adults, adolescents, children, and parents of young children about minimizing exposure to ultraviolet (UV) radiation for persons 6 months to 24 years with fair skin types to reduce their risk of skin cancer.
Tobacco use Prevention		
	Children and adolescents	Provide education, brief counseling to prevent initiation of tobacco use in school aged children and adolescents. Offer tobacco cessation on a regular basis.
Sexually Transmitted Infections		
	Adolescents	Intensive behavioral counseling for all sexually active adolescents at increased risk for sexually transmitted infections.

Preventive Medication

Prevention of Gonococcal Ophthalmia: Ocular Prophylaxis

Newborns	Provide ocular topical medication for all newborns to prevent gonococcal ophthalmia neonatorum.
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Prevention of HIV Infection: Preexposure Prophylaxis

Persons at high risk of HIV acquisition	Offer preexposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of HIV acquisition.
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Folic Acid Supplementation

Women who are planning or capable of pregnancy	For the prevention of neural tube defects; all women planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 mg. of folic acid.
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2020 Recommended Child and Adolescent (0-18 years) Immunization Schedules

Premera recommends that children be immunized following recommendations from the Centers for Disease Control (CDC) and Prevention and the Advisory Committee on Immunization Practices.

Specific vaccinations may be recommended based on the child's health condition, family lifestyle, travel, or activities. Members are encouraged to consult with their healthcare provider to ensure that their child is receiving vaccinations that offer the best protection.

The schedules linked below are updated annually by the CDC.

[Recommended Child and Adolescent \(0-18 years\) Immunization Schedule \(United States, 2020\)](#)

[Catch-up Immunization Schedule for children age 4 months through 18 years who start late or are more than one month behind. \(United States, 2020\)](#)

Vaccines that might be indicated for children and adolescents aged 18 years or younger based on medical indications. (United States, 2020)

Notes

The U.S. Preventive Services Task Force (USPSTF) grades its recommendations based on the strength of evidence and magnitude of net benefit (benefits minus harms).

Grade A: The USPSTF recommends the service. There is high certainty that the net benefit is substantial. *Suggestions for practice:* Offer or provide this service.

Grade B: The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial. *Suggestions for practice:* Offer or provide this service.

Grade C: The USPSTF recommends against routinely providing the service. There may be considerations that support providing the service in an individual patient. There is at least moderate certainty that the net benefit is small. *Suggestions for practice:* Offer or provide this service only if other considerations support the offering or providing the service in an individual patient.

Grade D: The USPSTF recommends against the service. There is moderate or high certainty that the Service has no net benefit or that the harms outweigh the benefits. *Suggestions for practice:* Discourage the use of this service.

Grade I: The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined. *Suggestions for practice:* Read the clinical considerations section of USPSTF Recommendation Statement. If the service is offered, patients should understand the uncertainty about the balance of benefits and harms.