Newborn’s and Children’s Preventive Health Guidelines

I. Policy

University Health Alliance (UHA) will reimburse for newborn’s and children’s preventive health services when it meets the clinical preventive services guidelines below.

II. Description

The Patient Protection and Affordable Care Act of 2010, passed in March 2010, put in place a number of comprehensive health insurance reforms. One of these was the elimination of cost sharing for certain preventive health services for members, where health plans can no longer charge a patient a co-payment, coinsurance or deductible. The intent is that more members will obtain the preventive health care needed to stay healthy and avoid or delay disease.

The preventive guidelines used to implement the new law were taken from the U.S. Preventive Services Task Force (USPSTF): Guide to Clinical Preventive Services (recommendations graded A or B), immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention, and the guidelines supported by the Health Resources and Services Administration (HRSA) which include the Bright Futures’ schedule of well-child visits.

The clinical preventive services guidelines below were derived from the clinical recommendations of the USPSTF. These guidelines are evidence-based and rely on current scientific studies. Each of the preventive services listed is a service that the USPSTF recommends that clinicians offer or provide in their practice setting.

Age-appropriate preventive screening services are provided for the purpose of promoting health and preventing illness or injury. Preventive counseling services will vary by age and should include issues such as family problems, diet and exercise, substance abuse, sexual practices, injury prevention, dental health and diagnostic laboratory tests results available at the time of the encounter.

III. Criteria/Guidelines

A. Office visits for history, physical examinations, developmental assessments, anticipatory guidance, laboratory tests, routine vision and hearing tests, and Immunizations are covered, according to the following schedule and limitations:

1. Birth to one year: Seven visits
2. Age one year: Three visits
3. Age two years: Two visits
4. Ages three years through twenty-one years: One visit per calendar year

B. Additional recommendations as shown in “Attachment A - Newborn’s and Children’s Preventative Health Guidelines” are covered as indicated.

IV. Administrative Guidelines

A. Prior Authorization is not required.
B. Modifier 33 should be appended to preventive services claims. When applied, Modifier 33 indicates that the preventive service is one that waives a patient's co-pay, deductible, and co-insurance. An exception is that modifier 33 does not have to be appended to those services that are inherently preventive.

**NOTE:**

*This UHA payment policy is a guide to coverage, the need for prior authorization and other administrative directives. It is not meant to provide instruction in the practice of medicine and it should not deter a provider from expressing his/her judgment.*

*Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member’s individual benefit plans may apply, and this policy is not a guarantee of payment. UHA reserves the right to apply this payment policy to all UHA companies and subsidiaries.*

*UHA understands that opinions about and approaches to clinical problems may vary. Questions concerning medical necessity (see Hawaii Revised Statutes §432E-1.4) are welcome. A provider may request that UHA reconsider the application of the medical necessity criteria in light of any supporting documentation.*

### V. Policy History

- **Policy Number:** MPP-0027-120301
- **Current Effective Date:** 04/18/2018
- **Original Document Effective Date:** 03/01/2012
- **Previous Revision Dates:** 10/05/2016, 12/01/2016, 01/01/2018
- **PAP Approved Date:** 03/01/2012
## Newborn's and Children's Preventive Health Guidelines

### Topic | Procedure Description | Limitations and Restrictions
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**Well-Child Visit** | Preventive Medicine office visit birth through age 21 | Birth to one year: 7 visits  
Age one year: 3 visits  
Age two years: 2 visits  
Ages three years through twenty-one years: One visit per calendar year

**Gonorrhea Prophylactic Medication** | Prophylactic ocular topical medication for all newborns for the prevention of gonococcal ophthalmia neonatorum | Administered in the hospital after delivery

**Newborn Screening for Metabolic Diseases and Hemoglobinopathies** | Screening for congenital hypothyroidism, sickle-cell disease, and phenylketonuria (PKU) in all newborns | One laboratory test

**Hearing Loss** | Screening for hearing loss | One per calendar year from ages 0 – 17 years old

**Psychosocial/Behavioral Assessment** | Assessment should be family centered and may include an assessment of child social-emotional health, caregiver depression, and social determinants of health | Outlined in *Bright Futures, 4th Edition*, published 2017

**Newborn Blood** | Newborn or 3-5 days old blood screening | Two drawings under age one

**Newborn Bilirubin** | Screening for bilirubin concentration at the newborn visit | Outlined in *Bright Futures, 4th Edition*, published 2017

**Dyslipidemia** | Screening for dyslipidemia | Two tests per calendar year from age 2 to 21

**Visual Acuity** | Screening for all children to detect amblyopia or its risk factors | One per calendar year from ages 0-17 years old

**Human Immune-Deficiency Virus (HIV)** | Screening for HIV in adolescents ages 15 and older. Younger adolescents who are at high risk should also be screened | One laboratory test per calendar year

**Iron Supplementation** | Routine iron supplementation for asymptomatic children 6 to 12 months of age who are at increased risk for iron deficiency anemia | Prescription required

**Prevention of Dental Caries** | Primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluoride | Prescription required

| | Primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption | Up to 2 applications every 12 months

**Obesity** | Screening for children 6 years of age and older for obesity and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status | Up to 12 services per calendar year

**Depression** | Screening for adolescents (12 to 21 years of age) for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy (cognitive-behavioral or interpersonal) and follow up | Once per calendar year

**Immunizations** | See CDC guidelines for current recommendation schedule <cdc.gov> | See CDC guidelines for current recommendation schedule <cdc.gov>
<table>
<thead>
<tr>
<th>Additional Recommendations</th>
<th>See CDC guidelines for current recommendation schedule <a href="https://cdc.gov">cdc.gov</a></th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Skin Cancer</strong></td>
<td>Counseling children, adolescents and young adults aged 10 to 24 years of age, who have fair skin, about minimizing their exposure to ultraviolet radiation to reduce their risk for skin cancer</td>
<td>Once per calendar year</td>
</tr>
<tr>
<td><strong>Tobacco Use and Tobacco-Caused Disease</strong></td>
<td>Provide interventions to include education or brief counseling to prevent initiation of tobacco use among school-aged children and adolescents</td>
<td>Up to eight visits per calendar year</td>
</tr>
<tr>
<td><strong>Syphilis, chlamydia, and gonorrhea</strong></td>
<td>Screening for adolescents at increased risk for infection</td>
<td>One laboratory test for each per calendar year</td>
</tr>
<tr>
<td><strong>Alcohol Misuse</strong></td>
<td>Screening and behavioral counseling for adolescents (11 to 17 years of age) to reduce alcohol misuse</td>
<td>Once per calendar year</td>
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</tbody>
</table>