

WEST VIRGINIA EPSDT/HEALTHCHECK PROGRAM PERIODICITY SCHEDULE

AGE	INFANCY							EARLY CHILDHOOD							MIDDLE CHILDHOOD						ADOLESCENCE										
	Newborn	3-5 days	By 1 mo	2 mo	4 mo	6 mo	9 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr	17 yr	18 yr	19 yr	20 yr	
HISTORY	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
MEASUREMENTS																															
Length/Height and Weight	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Head Circumference	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Body Mass Index																															
Blood Pressure (1)	★	★	★	★	★	★	★	★	★	★	★	★	★	★	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
SENSORY SCREENING																															
Vision	★	★	★	★	★	★	★	★	★	★	★	★	★	●	●	●	●	●	●	●	★	●	★	★	●	★	★	●	★	★	
Hearing (2)	●	★	★	★	★	★	★	★	★	★	★	★	★	●	●	●	●	●	●	●	★	★	★	★	★	★	★	★	★	★	
DEVELOPMENTAL/BEHAVIORAL ASSESSMENTS																															
Developmental and Autism Surveillance	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Developmental Screening																															
Autism Screening								★	★	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Psychosocial/Behavioral Screening	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Depression Screening (3)																															
Alcohol and Drug Use Screening (4)																					★	★	★	★	★	★	★	★	★	★	
PHYSICAL EXAMINATION PROCEDURES																															
Newborn Metabolic Screening (5)		●																													
Critical Congenital Heart Defect Screening (6)	●																														
Immunizations (7)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Hemoglobin or Hematocrit					★			●	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	
Blood Lead Screen								●	★	★	●	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	
Lead Risk Screening						●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Tuberculosis Risk Screening			★			★		★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	★	
Dyslipidemia Risk Screening											★					★		★	★	★	★	★	★	★	★	★	★	★	★	★	
Fasting Lipoprotein Profile																															
STI/HIV Risk Screening (8)(9)																					★	★	★	★	★	★	←	●	→	★	★
ORAL HEALTH (10)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
HEALTH EDUCATION WITH ANTICIPATORY GUIDANCE	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	

KEY: ● = to be performed ★ = risk assessment to be performed with appropriate action to follow, if positive
 ← ● → = range during which a service may be provided

The HealthCheck Program works to equip West Virginia's Medicaid providers with the necessary tools and knowledge to carry out EPSDT services appropriate to the American Academy of Pediatrics' (AAP) standard for pediatric preventive health care, [Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents](http://www.integration.samhsa.gov/images/res/PHQ%20-%20Questions.pdf). HealthCheck stresses the importance of continuity of care in the medical home and the need to avoid fragmentation of care.

- Blood pressure should be performed in infants and children before 3 years of age with specific risk conditions.
- Newborn hearing screening should be completed according to State law. Results should be reviewed and appropriate retesting or referral completed as needed.
- Patient Health Questionnaire (PHQ) 2 recommended questions on the Preventive Health Screening forms. If positive, perform PHQ 9 <http://www.integration.samhsa.gov/images/res/PHQ%20-%20Questions.pdf> or other tool available in the GLAD-PC tool kit at http://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Mental-Health/Documents/MH_ScreeningChart.pdf.
- If positive for alcohol/drug use, complete recommended screening tool CRAFFT available at <http://www.ceasar-boston.org/CRAFFT/index.php> or www.dhhr.wv.gov/healthcheck.
- Newborn metabolic screening should be completed according to State law. Results should be reviewed and appropriate retesting or referral completed as needed.
- Screening for critical congenital heart disease using pulse oximetry should be performed in newborns, after 24 hours of age, before discharge from hospital. Refer to the Bureau for Public Health policy at http://www.wvdhhr.org/nbms/ponta/CCHD_OPERATIONAL_POLICY_UPDATE_7162012.pdf.
- Immunizations should be reviewed and updated at each visit. Immunizations should be administered in accordance with Advisory Committee on Immunization Practices (ACIP), AAP and American Academy of Family Physicians (AAFP) recommendations.
- Adolescents should be screened for sexually transmitted infections (STIs) per recommendations in the current edition of the *AAP Red Book: Report of the Committee on Infectious Diseases*.
- Adolescents should be screened for HIV according to the AAP statement (<http://pediatrics.aappublications.org/content/128/5/1023.full>) once between the ages of 16 and 18, making every effort to preserve confidentiality of the adolescent. Those at increased risk of HIV infection, including those who are sexually active, participate in injection drug use or are being tested for other STIs, should be tested for HIV and reassessed annually.
- Refer to a dental home at age one. Earlier initial dental evaluation may be appropriate for some children.

Iron-Deficiency Anemia Screening

Risk Factors:

Low birthweight or preterm birth
Non-iron-fortified formula
Cow's milk before age 12 months
Diet low in iron, inadequate nutrition
Meal skipping, frequent dieting
Heavy/lengthy menstrual periods or recent blood loss
Intensive physical training or participation in endurance sports
Pregnancy or recent pregnancy

Refer to the HealthCheck Provider Manual for more information.

Tuberculosis (TB) Risk Screen

Radiographic findings suggesting TB

Contact with persons with confirmed or suspected TB

Immigrant from high prevalence areas (e.g., Asia, Middle East, Africa, Latin America)

Travel to high prevalence areas

Only children with increased risk of exposure to persons with TB should be considered for tuberculin skin testing.

Refer to the HealthCheck Provider Manual for more information.

Dyslipidemia Risk Screen

Positive family history is defined as a history of premature (≤ 55 years of age) cardiovascular disease in a parent or grandparent

Positive family history, elevated blood cholesterol ≥ 240 mg/dl

Unknown family history, adopted

Cigarette smoking

Elevated blood pressure

Overweight/Obesity (BMI $\geq 85\%$)

Diabetes mellitus

Physical inactivity

Poor dietary habits

When one or more risk factors indicate that the child is high risk, then an initial fasting lipid profile should be obtained.

Refer to the HealthCheck Provider Manual for more information.

For more information contact the HealthCheck Program at 1-800-642-9704 or visit our website at www.dhhr.wv.gov/healthcheck.

