

Preventive Health Guidelines

GUIDE TO CLINICAL PREVENTIVE SERVICES FOR CHILDREN AND ADOLESCENTS

Premera has adopted the [United States Preventive Services Task Force \(USPSTF\) Guide to Clinical Preventive Services](#). The preventive services included in the guidelines are services that the USPSTF recommends clinicians discuss with eligible patients and parents/guardians and offer as a priority. Services listed as an A or B grade unless otherwise noted, 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. Premera recommends following the [Recommended Child and Adolescent 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 Premera'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, Premera 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 Premera Customer Service number listed on the back of the patient's ID card.

Although the guidelines reflect national recommendations, they are not a substitute for the clinical judgment of practitioners advising and caring for individual patients. Premera reviews and updates the guidelines at least every two years.

2022 Recommended Child and Adolescent (0-18 years) Immunization Schedules

Premiera 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, 2022)
- [Catch-up Immunization Schedule](#) for children aged 4 months through 18 years who start late or are more than one month behind. (United States, 2022)
- Vaccines that might be indicated for children and adolescents aged 18 years or younger based on [medical indications](#). (United States, 2022)

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.