Texas Health Steps Periodicity Schedule

COMPREHENSIVE HEALTH SCREENING* - BIRTH THROUGH 10 YEARS

*Comprehensive Health Screening is defined as: both objective screening with use of standardized procedures or screening tools and subjective screening of those components when a standardized procedure or screening tool is not required, for example, visits when audiometric hearing screening is not required. Screening must be age-appropriate and based on recognized national standards such as the National Center for Education in Maternal and Child Health (NCEMCH) Bright Futures. The absence of a symbol indicates that subjective screening is appropriate unless the provider determines an objective screen or test is necessary. Refer to the Texas Medicaid Provider Procedure Manual (TMPPM) for further detail.

				MEASUREMENTS									DEVELOPMENTAL SCREENING				LABORATORY TESTS					TB SCREENING			idance
AGE		History	Length	Height	Weight	BMI Fronto-Occipital Circumference	Blood Pressure	Unclothed Physical Examination	Vision Screening (objective)	Hearing Screening (objective)	Nutritional Screening	ASQ or PEDS	Autism Screening: MCHAT	Mental Health Screening	Screen/Administer Immunizations according to ACIP Guidelines	Newborn Hereditary/ Metabolic Testing	Blood Lead Screening	Anemia	Hyperlipidemia (as indicated)	Diabetes Type II (as indicated)	TB risk screening tool	TB Skin Test (as indicated by risk)	Dental Referral	Health Education/Anticipatory Guidance	
ľ	Vewborn	•	•		•		•		•		•	•			•	•	•								•
3	3-5 days	•	•		•		•		•			•			•	•									•
- 2	2 weeks	•	•		•		•		•			•			•	•	•								•
	2	•	•		•		•		•			•			•	•									•
	4	•	•		•		•		•			•			•	•									•
	6	•	•		•		•		•			•			•	•								•	•
Months	<u>2</u> 9	•	•		•		•		•			•	•		•	•									•
1	12	•	•		•		•		•			•			•	•		•	•			_		•	•
Σ	10	•	•		•		•		•			•			•	•									•
	18	•	•		•		•		•			•	•	•	•	•								•	•
	24	•	•		•	•	•		•			•	•		•	•		•	•			_		•	•
	30	•	•		•	•			•			•			•	•								•	•
	3	•		•	•	•		•	•	•		•	•		•	•						_		•	•
	4	•		•	•	•		•	•	•	•	•	•		•	•						_		•	•
	5	•		•	•	•		•	•	•	•	•			•	•						_		•	•
Vaare	² 6	•		•	•	•		•	•	•	•	•			•	•						_		•	•
Š	7	•		•	•	•		•	•			•			•	•						_		•	•
	8	•		•	•	•		•	•	•	•	•				•								•	•
	9	•		•	•	•		•	•			•			•	•						_		•	•
	10	•		•	•	•		•	•	•	•	•			•	•								•	•

LEGEND OF SYMBOLS

- Indicates a component is mandatory to complete during the checkup. If a component is not completed at the required age, then the provider must complete at the next checkup, if age-appropriate, or whenever medically necessary.
- TB screening: Administer the DSHS approved questionnaire annually beginning at 1 year of age and administer TB skin test if indicated.





COMPREHENSIVE HEALTH SCREENING* - 11 THROUGH 20 YEARS

*Comprehensive Health Screening is defined as: both objective screening with use of standardized procedures or screening tools and subjective screening of those components when a standardized procedure or screening tool is not required, for example, visits when audiometric hearing screening is not required. Screening must be age-appropriate and based on recognized national standards such as the National Center for Education in Maternal and Child Health (NCEMCH) Bright Futures. The absence of a symbol indicates that subjective screening is appropriate unless the provider determines an objective screen or test is necessary. Refer to the Texas Medicaid Provider Procedure Manual (TMPPM) for further detail.

				MEASUF	REMENTS			Vision Screening (objective)	Hearing Screening (objective)	Nutritional Screening	Mental Health Screening	Screen/Administer Immunizations according to ACIP Guidelines	LABORATORY TESTS (as indicated)					TB SCR	EENING		dance
	AGE	History	Height	Weight	ВМІ	Blood Pressure	Unclothed Physical Examination						Anemia (for females only once between 12 and 16 years)	Hyperlipedemia	Diabetes Type II	STD Screening	HIV test	TB risk screening tool	TB Skin Testing (as indicated by risk)	Dental Referral	Health Education/Anticipatory Guidance
	11	•	•	•	•	•	•			•	•	•						_		•	•
	12	•	•	•	•	•	•	•		•	•	•	•					_		•	•
	13	•	•	•	•	•	•			•	•	•						A		•	•
	14	•	•	•	•	•	•			•	•	•						_		•	•
Years	15	•	•	•	•	•	•	•	•	•	•	•						_		•	•
Se	16	•	•	•	•	•	•			•	•	•						_		•	•
	17	•	•	•	•	•	•			•	•	•						_		•	•
	18	•	•	•	•	•	•	•		•	•	•						A		•	•
	19	•	•	•	•	•	•			•	•	•						_		•	•
	20	•	•	•	•	•	•			•	•	•						A		•	•

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