Adult Health Maintenance Clinical Practice Guideline

This Practice Guideline represents a core set of clinical guidelines for average-risk members, adapted from various professional organizations, and National Guideline recommendations. These include but are not limited to: the U.S. Preventive Services Task Force; Centers for Disease Control and Prevention; American Diabetic Association; American Cancer Society; Academy of Family Physicians and the U.S. Department of Health and Human Services Guide to Clinical Preventive Services. Quality Committee Physician input is also a key part in the development of this guideline. This guideline is intended as quality best-practice recommendations and may not reflect all current member coverage and benefits.

History (Age 18 and over) - History documented in chart: Interval medical and family history including medication use (prescription and non-prescription), allergies, dietary intake, physical activity, any assistive device use (glasses, contact lenses, hearing aids, dentures, braces, canes, walkers etc.), tobacco/alcohol/drug use and sexual practices. After obtaining initial/interval history:

- Perform age-appropriate physical exam
- Provide preventive screenings and counseling in tables below
- Update immunizations. See the Adult Immunization Schedule and Summary of recommendations for Adult Immunizations at [http://www.cdc.gov/vaccines/schedules/hcp/adult.html](http://www.cdc.gov/vaccines/schedules/hcp/adult.html)

Documentation of Complete Physical Exam (Age 18 and over) - Documentation of complete physical exam with a system-by-system assessment for a comprehensive medical assessment (exam written as WNL is not acceptable).

Exam Schedule (ages 18-64 years) - Exam at least every three years.

Measurements

<table>
<thead>
<tr>
<th></th>
<th>Ages 18-65</th>
<th>Ages 65 and Older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure</td>
<td>Check every two years. Check yearly if SBP is 120 to 139 Hg or DBP is 80 to 90Hg</td>
<td>Annual screenings. Monitor closely if chronic conditions exist</td>
</tr>
<tr>
<td>Height and Weight</td>
<td>Screen for obesity by measuring height and weight periodically. Calculation of BMI is appropriate. Patients with a BMI of 30 kg/m² should be offered or referred to intensive, multicomponent behavioral interventions</td>
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</tr>
<tr>
<td>Cardiac Auscultation, Vision and Hearing Assessments and Functional Status</td>
<td>Depends on risk factors</td>
<td>Annually at a minimum.</td>
</tr>
</tbody>
</table>
### Routine Screenings

<table>
<thead>
<tr>
<th>Test</th>
<th>Population</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholesterol (fasting lipoprotein profile)</td>
<td>Ages 20 and older</td>
<td>Once every 5 years</td>
</tr>
<tr>
<td>Diabetes (Type II)</td>
<td>Ages 18 years and older who are asymptomatic but have risk factors (BMI ≥ 25kg/m² and a sustained BP &gt; 140/90)</td>
<td>Annual screening</td>
</tr>
<tr>
<td></td>
<td>Ages 45 and older (without risk factors)</td>
<td>Every 3 years</td>
</tr>
<tr>
<td>Human Immunodeficiency Virus (HIV)</td>
<td>Ages 18-64 years</td>
<td>Routinely for all individuals and at least annually for those at high risk for HIV infection (see Attachment 4) Routinely for all pregnant women</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>Ages 18 and older</td>
<td>See Attachment 1 for detailed information</td>
</tr>
<tr>
<td>Depression</td>
<td>Ages 18 and older</td>
<td>See Attachment 2</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>All patients born between 1945 - 1965</td>
<td>One time screening</td>
</tr>
</tbody>
</table>
| Hepatitis B                   | Ages 18 and older (non-pregnant) at high risk for infection and have not been vaccinated (including those who were vaccinated before being screened for HBV infection) | Routine screening
                               |                                                                             | See Attachment 5 for high risk groups                                      |
| Osteoporosis                  | **Women** ages 65 years and older (in younger women whose fracture risk is ≥ that of a 65 year old women who has no additional risk factors) | Once every two years                                                     |
|                               | **Men** age 70 years and older                                           | Routine screening                                                        |
| Abdominal Aortic Aneurysm     | **Men** ages 65-75 years who have ever smoked                             | One time screening                                                       |
| Lung Cancer Screening         | Adults ages 55 to 80 years with a 30 pack-year smoking history and currently smoke or have quit within the past 15 years | Annual screening with low-dose computed tomography until member has not smoked for 15 years, or whose health limits life expectancy or curative surgery. |

### Colorectal Cancer Screenings

<table>
<thead>
<tr>
<th>Test</th>
<th>Ages 50-75 years</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fecal occult blood test</td>
<td></td>
<td>Annually</td>
</tr>
<tr>
<td>Flexible Sigmoidoscopy (earlier than fifty for high risk individuals)</td>
<td></td>
<td>Once every 5 years</td>
</tr>
<tr>
<td>Colonoscopy (earlier for high risk individuals)</td>
<td></td>
<td>Once every 10 years</td>
</tr>
<tr>
<td>Barium Enema (earlier for high risk individuals)</td>
<td></td>
<td>Once every 5 years</td>
</tr>
</tbody>
</table>
### Breast Cancer Screenings (Women)

<table>
<thead>
<tr>
<th></th>
<th>Under 40 years of age</th>
<th>Age 40 years and older</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinical Breast Exam</strong></td>
<td>Minimally every 3 years; annually for high risk/history</td>
<td>Annually</td>
</tr>
<tr>
<td><strong>Mammography</strong></td>
<td></td>
<td>Annual screening</td>
</tr>
</tbody>
</table>

### Cervical Cancer/Uterine Cancer Screenings (Women)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pap Test</strong></td>
<td>See BCNEPA Preventive Health GYN Exam Guideline</td>
</tr>
<tr>
<td><strong>Pelvic Exam</strong></td>
<td>See BCNEPA Preventive Health GYN Exam Guideline</td>
</tr>
</tbody>
</table>

### Other Female Specific Screenings/Counseling

<table>
<thead>
<tr>
<th>Population</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rubella</strong></td>
<td>Review for all women of childbearing potential</td>
</tr>
<tr>
<td></td>
<td>Document history of at least two doses of MMR or serologic evidence of any rubella specific antibody</td>
</tr>
<tr>
<td><strong>Chlamydia</strong></td>
<td>All sexually active non-pregnant women aged 25 and younger and older non-pregnant women who are at increased risk (new or multiple sex partners and lack of barrier contraception)</td>
</tr>
<tr>
<td><strong>Sexually Transmitted Infection</strong></td>
<td>All sexually active women</td>
</tr>
<tr>
<td><strong>Human Papilloma Virus</strong></td>
<td>DNA testing for all women between the ages of 30 and 65</td>
</tr>
<tr>
<td><strong>Gestational Diabetes</strong></td>
<td>Females with gestational diabetes</td>
</tr>
<tr>
<td><strong>Domestic Violence</strong></td>
<td>All women (especially women of childbearing age) (Screening and Counseling)</td>
</tr>
</tbody>
</table>

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First Priority Health® & First Priority Life Insurance Company®
## Prostate Cancer Screening

<table>
<thead>
<tr>
<th>Test</th>
<th>Age 45 years and older</th>
<th>Age 50 years and older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prostate Specific Antigen (PSA)</td>
<td>If African American or family history before the age of 65 offer at the physician/patient discretion</td>
<td>May be offered at the physician/patient discretion</td>
</tr>
<tr>
<td>Digital Rectal Exam (DRE)</td>
<td>May be offered as an early detection method at the physician/patient discretion</td>
<td>May be offered at the physician/patient discretion</td>
</tr>
</tbody>
</table>

## Medication Recommendations

<table>
<thead>
<tr>
<th>Medication</th>
<th>Population</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Folic Acid</td>
<td><strong>Women</strong> capable of or planning a pregnancy</td>
<td>Daily supplement</td>
</tr>
<tr>
<td>Aspirin</td>
<td><strong>Men</strong> ages 45-79 for the prevention of cardiovascular disease to reduce an MI occurrence (when the potential harm of an increase in GI hemorrhage is outweighed by potential benefit)</td>
<td>Daily dose</td>
</tr>
<tr>
<td></td>
<td><strong>Women</strong> ages 55-79 for the prevention of ischemic stroke (when the potential harm of an increase in GI hemorrhage is outweighed by potential benefit)</td>
<td>Daily dose</td>
</tr>
<tr>
<td>Vitamin D</td>
<td>Adults 65 years of age or older who live in the community and are at increased risk of falls</td>
<td>Daily supplement</td>
</tr>
</tbody>
</table>
Recommended Education Topics Ages 18-64 Years:

**Diet:** Encourage a diet high in fruits, vegetables, grains and foliate supplementation. Limit sodium and fat content. Increase fiber and calcium intake.

**Exercise:** Encourage regular exercise including cardiovascular, resistance and strength training.

**Weight Loss:** Recommended treatment approaches for specific patients, target realistic goals and provide ongoing support.

**Substance Abuse:** Tobacco/Alcohol/Drug cessation, anabolic steroid use, driving while under the influence, treatment for abuse, referral to tobacco cessation program. For adults engaged in risky or hazardous drinking, provide brief behavioral counseling interventions to reduce alcohol misuse.

**Self-Examination:** Breast, testicular and skin.

**Sexual Practices:** Sexually Transmitted Diseases, unintended pregnancy and contraceptive counseling. For adults at increased risk for sexually transmitted infections, offer intensive behavioral counseling. Adults should be considered at risk if they have current STIs or have had an STI within the past year and/or multiple sexual partners.

**Injury Prevention:** Domestic violence, car safety, safety helmet use, smoke detector placement and usage, occupational health and hazards of smoking near bedding and upholstery.

**Dental Health:** Regular brushing and flossing and regular dental check-ups.

**Other:** Hormone replacement therapy in age appropriate women. Protection from UV rays, aspirin therapy in appropriate candidates.

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Recommended Education Topics Ages 65 and Older:

**Diet:** Nutritional Assessment. A diet that limits fats and sodium. Increase fiber and calcium intake. Recommend a diet high in fruits, vegetables and grains.

**Exercise:** Encourage regular physical activity as tolerated.

**Substance Abuse:** Tobacco cessation and referral to programs, limit alcohol intake, drug cessation, treatment for abuse, etc.

**Self-Examination:** Breast, testicular and skin.

**Sexual Practices:** Sexual function and behavior, sexually transmitted diseases.

**Injury Prevention:** Fall risk assessments, water temperature settings, domestic violence, smoking near bedding or near upholstery, car safety, smoke detector use and replacement.

**Dental Health:** Regular brushing and flossing, regular dental visits.

**Other:** Protection from UV rays, aspirin therapy, glaucoma testing, advance directives/living wills/durable power of attorney for health care decisions.
REFERENCES

Guide to Clinical Preventive Services, 2014
Recommendations of the U.S. Preventive Services Task Force
http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/guide/

U.S Preventive Services Task Force, Recommendations for Adults, Retrieved from:
http://www.uspreventiveservicestaskforce.org/adultrec.htm

U.S. Preventive Services Task Force; Screening for and Management of Obesity in Adults: U.S.
Preventive Services Task Force Recommendation Statement.
http://www.uspreventiveservicestaskforce.org/uspsf/uspsobes.htm

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in Diabetes, 2014 Retrieved at:
http://care.diabetesjournals.org/content/37/Supplement_1/S5.full

National Center for HIVAIDS, Viral Hepatitis, STD, and TB Prevention: Core Curriculum on

CDC TB Guidelines and Recommendations @ http://www.cdcnpin.org/scripts/tb/cdc.asp
updated 4/21/2014

U.S. Preventive Services Task Force: Screening for HIV, April 2013 retrieved @
http://www.uspreventiveservicestaskforce.org/uspsf/uspshivi.htm

U.S. Preventive Services Task Force: Screening for Depression in Adults retrieved @
http://www.uspreventiveservicestaskforce.org/uspsf/uspsaddepr.htm

Screening for Hepatitis C Virus Infection in Adults, June 2013 retrieved @
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Screening for Hepatitis B Virus Infection in Non-pregnant Adolescents and Adults: U.S.
Preventive Services Task Force Recommendation Statement Screening for Hepatitis B Virus
Infection. Michael L. LeFevre, MD, MSPH, on behalf of the U.S. Preventive Services Task
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Health and Wellness with Blue Health Solutions℠

Blue Cross of Northeastern Pennsylvania is committed to the good health of our members, your patients. We encourage members to make the right choices to live a healthy life through Blue Health Solutions, our individualized health management and wellness program—designed to help each person improve his/her health or maintain a healthy lifestyle.

With Blue Health Solutions, your patients gain access to the many valuable resources. All of the following are available using the “Health & Wellness” tab on bcnepa.com. Some services will require your patients to register and then login to member Self-Service.

A confidential Health Assessment will help your patients better understand how their health history and lifestyle choices may impact their future health. If a patient’s assessment shows health risks, a personal health coach can help him/her to develop a customized health improvement plan. Patients decide how little or how much help they want to receive.
Our health coaches are qualified health professionals—registered nurses and dietitians—who have the expertise to map out health solutions and help your patients make the right choices. To speak with a health coach, patients can call 1.866.262.4764 or (TTY) 1.877.720.7771, weekdays, between 8 a.m. and 8 p.m. ET.

MyHealth Solution, our online health and wellness resource, makes it easier than ever for your patients to make positive changes to help improve their health. Features include online programs and action plans, health videos, a comprehensive health library, a personal Health Record and much more.

Your patients can learn more about the following resources by visiting bcnepa.com. Or, they can call 1.866.262.4764 and speak with a health coach.

Wellness and Lifestyle Management—Resources are available to help your patients lose weight, manage stress or quit smoking. And, for expectant mothers, we offer maternity care resources before, during and after the big event. Health coaches can also help your patients who are dealing with chronic back pain, high cholesterol, high blood pressure and much more.

Health Management—Health coaches can also help your patients manage chronic conditions like asthma, cardiovascular disease, chronic obstructive pulmonary disease (COPD), depression, diabetes and heart failure.

Care Management—Resources are available to help patients who need complex care in the hospital or help transitioning care before and after surgeries. We also provide education, follow-up and support for other chronic long-term conditions.

24/7 Nurse Now—Patients can speak with registered nurses about anything from chronic conditions to common health concerns, anytime day or night. To learn more, patients can call 1.866.442.2583. Or, if they prefer, your patients can register/logon to Self-Service and chat with a nurse online.

Blue Health Solutions also offers a Life-Balance Resource with experienced counselors who are on call 24/7 to help your patients cope with everyday stress, family issues, drugs, alcohol, threats of violence and more.

Our Discount Program will help your patients save money on health-related products and services. Discounts are available on aromatherapy, massage therapy, hearing and vision services, nutritional counseling, weight management programs, at fitness centers and much more.

Discounts from national vendors are also available with Blue365®. Your patients can find local participating businesses and national vendors on our website at Discounts on Health & Wellness Services.

Please Note: Patients enrolled in BlueCare Security and BlueCare Senior are eligible only for the health-related discounts available with the Discount Program.

TOOLS:

Chart forms are available to assist providers in documentation of the contents of this Guideline. For a list of chart forms, with links to printable copies, click on Provider at bcnepa.com and select Quality Management, then QM Chart Forms.
Based on published reports in the medical literature and CDC surveillance data, the recommendation is that the following groups be screened for TB and TB infection:

- Close contacts (i.e., those sharing the same household or other enclosed environments) of persons known or suspected to have TB
- Persons infected with HIV
- Persons who inject illicit drugs or other identified high-risk substance users (e.g., crack cocaine users)
- Persons who have medical risk factors known to increase the risk for disease if infection occurs (diabetes mellitus, conditions requiring prolonged high-dose corticosteroid therapy and other immunosuppressive therapy, chronic renal failure, some hematologic disorders, other specific malignancies (e.g., carcinoma of the head or neck), weight of >10% below ideal body weight, silicosis, gastrectomy and jejunoileal bypass
- Residents and employees of high-risk congregate settings (e.g., correctional institutions, nursing homes, mental institutions, other long-term residential facilities and shelters for the homeless)
- Health care workers who serve high-risk clients
- Foreign-born persons, including children, recently arrived (within five years) from countries that have a high TB incidence or prevalence
- Some medically underserved, low-income populations
- High-risk racial or ethnic minority populations, as defined locally and
- Infants, children and adolescents exposed to adults in high-risk categories.

Flexibility is needed in defining high priority groups for screening. The changing epidemiology of TB indicates that the risk for TB among groups currently considered high priority may decrease over time, and groups currently not identified as at-risk subsequently may be considered as high priority. Local public health officials should identify community groups among whom TB and transmission of infection occur.
ATTACHMENT 3

Risk Factors for Osteoporosis identified by the National Osteoporosis Foundation

- Advanced age
- Being female
- Personal history of fracture as an adult
- History of fragility fracture in a first degree relative
- Family history of osteoporosis
- Low body weight (< about 127lbs)
- Current low bone mass
- Estrogen deficiency at an early age (<45 years)
- Abnormal absence of menstrual periods (Amenorrhea)
- Anorexia nervosa
- Low lifetime calcium intake
- Use of certain medications, such as oral corticosteroids and anticonvulsants
- Low testosterone levels in men
- An inactive lifestyle
- Little or no weight bearing exercise
- Current cigarette smoking
- Excessive use of alcohol
- Vitamin D deficiency
- Malabsorption states (i.e. celiac)
- Long-term proton-pump inhibitor use.
- Diet low in fruit and vegetable consumption
- Diet high in protein, sodium and/or caffeine

ATTACHMENT 4

Risk Factors for HIV Transmission

Individuals who have:

- Injected drugs or steroids, during which equipment (needles, syringes, cotton, water) and blood were shared with others
- Had unprotected vaginal, anal or oral sex (sex without using condoms) with men who have sex with men, multiple partners or anonymous partners
- Exchanged sex for drugs or money
- Been given a diagnosis of, or been treated for, hepatitis, TB or a sexually transmitted disease

Had unprotected sex with someone who has any of the risk factors listed above
ATTACHMENT 5

High Risk Groups for Hepatitis B Infection:

- People who were born in countries where hepatitis B is common
- People who were not vaccinated against hepatitis B when they were babies and whose parents came from countries where hepatitis B is common
- People with HIV infection
- Injection drug users
- People living with or having sex with people infected with hepatitis B
- Men who have sex with men
- Patients who have a weakened immune system or undergo treatment for kidney failure (hemodialysis)

APPLICATION OF PRACTICE GUIDELINE:

This Practice Guideline applies to the following companies:

First Priority Life Insurance Company®
HMO of Northeastern Pennsylvania (d/b/a First Priority Health®)

APPROVAL

Approved: Medical Quality Management Committee 7/24/90
Revised: Medical Quality Management Committee 8/15/92, 8/20/92
10/27/94, 3/31/97
Quality Improvement Committee 8/12/99, 4/13/00, 4/05/01, 5/13/02
10/10/02, 10/09/03, 10/14/04, 10/12/06
10/09/08, 10/14/10
9/20/2012, 9/11/14