



# **Texas Health Steps (THSteps) Checkup Components: A Whole Office Team Approach**

---



**TEXAS**  
Health and Human  
Services

**June 2021**

6/29/2021

# 1. Comprehensive and Developmental History

## History: Initial and Interval

NOTE: The THSteps clinical record form is intended to be completed by clinical staff obtaining information from the parent/patient. An interval history using the THSteps history form should also be completed in the same manner.

- Front office/support staff:
  - ▶ Provide initial office-specific history form(s)
- Clinical staff:
  - ▶ Provide and review office-specific screening form(s)
  - ▶ Complete office-specific history form(s)
  - ▶ Complete THSteps history form by parent/patient interview
- Provider:
  - ▶ Review initial history or interval history updates

## Nutritional Screening

- Front office/support staff:
  - ▶ Provide office-specific screening form(s)
- Clinical staff:
  - ▶ Provide office-specific screening form(s)
  - ▶ Review completed screening form(s)
  - ▶ Complete nutritional screening by parent/patient interview
- Provider:
  - ▶ Review completed screening form(s)

## Developmental Surveillance

- Front office/support staff – N/A
- Clinical staff:
  - ▶ Complete review of milestones by parent/patient interview
  - ▶ Provide office-specific surveillance/screening tool(s)
  - ▶ Score surveillance/screening tool(s)
  - ▶ Review results
- Provider:
  - ▶ Review completed review of milestones and/or surveillance/screening tool results

## Developmental Screening

- Front office/support staff:
  - ▶ Provide THSteps approved developmental screening form(s)

- Clinical staff:
  - ▶ Provide THSteps approved developmental screening form(s)
  - ▶ Review results of screening
  - ▶ Score screening tool
- Provider:
  - ▶ Review results of screening
  - ▶ Complete referral if indicated

## **Autism Screening**

- Front office/support staff –
  - ▶ Provide THSteps approved developmental screening form(s)
- Clinical staff:
  - ▶ Provide THSteps approved developmental screening form(s)
  - ▶ Review results of screening
  - ▶ Score screening tool
- Provider:
  - ▶ Review results of screening
  - ▶ Complete referral if indicated

## **Mental Health Screening - General**

- Front office/support staff:
  - ▶ Provide office-specific mental health screening tool(s)
- Clinical staff:
  - ▶ Provide office-specific mental health screening tool(s)
  - ▶ Review results of screening
  - ▶ Score screening tool
  - ▶ Complete screening by parent/patient interview
- Provider:
  - ▶ Review results of screening
  - ▶ Complete referral if indicated

## **Mental Health Screening – Postpartum Depression**

- Front office/support staff:
  - ▶ Provide office-specific postpartum depression screening tool(s)
- Clinical staff:
  - ▶ Provide office-specific postpartum depression screening tool(s)
  - ▶ Review results of screening
  - ▶ Score screening tool
- Provider:
  - ▶ Review results of screening
  - ▶ Complete referral if indicated

## **Mental Health Screening - Adolescents**

- Front office/support staff:
  - ▶ Provide THSteps approved mental health screening tool(s)
- Clinical staff:
  - ▶ Provide THSteps approved mental health screening tool(s)
  - ▶ Review results of screening
  - ▶ Score screening tool
- Provider:
  - ▶ Review results of screening
  - ▶ Complete referral if indicated

## **TB Screening**

- Front office/support staff:
  - ▶ Provide THSteps TB screening tool(s)
- Clinical staff:
  - ▶ Provide THSteps TB screening tool(s)
  - ▶ Review results of screening
  - ▶ Score screening tool
  - ▶ Administer Tuberculin Skin Test (TST) if indicated
- Provider:
  - ▶ Review results of screening
  - ▶ Order TST if indicated
  - ▶ Complete referral if indicated

## 2. Comprehensive Unclothed Physical Examination

### Critical Congenital Heart Defect Screening

- Front office/support staff:
  - ▶ Obtain birth facility screening results
- Clinical staff:
  - ▶ Obtain birth facility screening results
  - ▶ Review screening results
  - ▶ Complete in-office screening if indicated
- Provider:
  - ▶ Review birth facility screening results
  - ▶ Refer for screening if indicated

### Measurements (Length/height, weight, BMI, FOC and BP)

- Front office/support staff – N/A
- Clinical staff:
  - ▶ Obtain and graph all measurements
- Provider:
  - ▶ Review results

### Vision Screening (subjective and visual acuity screening)

- Front office/support staff:
  - ▶ Obtain school-based vision screening results
  - ▶ Provide office-specific subjective vision screening tool
- Clinical staff:
  - ▶ Obtain school-based vision screening results
  - ▶ Review results of school-based vision screening
  - ▶ Provide office-specific subjective vision screening tool
  - ▶ Complete subjective screening by interview with parent/patient
  - ▶ Complete visual acuity screening
- Provider:
  - ▶ Review results
  - ▶ Complete referral if indicated

### Hearing Screening – Newborn

- Front office/support staff:
  - ▶ Obtain newborn hearing screening results from birth facility

- Clinical staff:
  - ▶ Obtain newborn hearing screening results from birth facility Obtain school-based hearing screening results
  - ▶ Review results of newborn hearing screening
  - ▶ Complete newborn hearing screening
- Provider:
  - ▶ Review results of birth facility newborn hearing screening
  - ▶ Discuss results with parents/guardian
  - ▶ Refer for screening if indicated

## Hearing Screening - General

- Front office/support staff:
  - ▶ Obtain school-based hearing screening results
  - ▶ Provide office-specific subjective hearing screening tool
- Clinical staff:
  - ▶ Obtain school-based hearing screening results
  - ▶ Review results of school-based hearing screening
  - ▶ Provide office-specific subjective hearing screening tool
  - ▶ Complete subjective screening by interview with parent/patient
  - ▶ Complete audiometric screening
- Provider:
  - ▶ Review results
  - ▶ Complete referral if indicated

## 3. Immunizations Appropriate For Age and Health History

### Immunizations

- Front office/support staff:
  - ▶ Obtain immunization record
  - ▶ Enter immunizations into ImmTrac
- Clinical staff:
  - ▶ Obtain immunization record Provide list of Medicaid enrolled dental providers
  - ▶ Determine needed immunizations
  - ▶ Obtain consent and provide Vaccine Information Statements (VIS)
  - ▶ Administer immunizations (provider order or standing orders)
  - ▶ Enter immunizations into ImmTrac
- Provider:
  - ▶ Review immunizations
  - ▶ Order needed immunizations
  - ▶ Counsel regarding immunizations

## 4. Laboratory Tests Appropriate to Age and Risk

### Laboratory Tests / Screenings Front Office/Support Staff:

- ▶ Obtain results of first newborn blood screen
- Clinical staff:
  - ▶ Obtain results of first newborn blood screen
  - ▶ Determine age appropriate mandatory/required laboratory screenings
  - ▶ Identify possible risk-based screenings
  - ▶ Collect specimen(s) for point-of-care testing or submission to a laboratory
  - ▶ Review results of point-of-care tests
  - ▶ Complete laboratory request forms for specimens collected in-office and submitted to a laboratory (DHS or lab of provider's choice)
- Provider:
  - ▶ Review age appropriate mandatory and risk-based laboratory screenings
  - ▶ Review results of point-of-care tests
  - ▶ Order laboratory screenings/tests



## 5. Dental Referral

### Dental Referral\*

- Front office/support staff:
  - ▶ Provide list of Medicaid enrolled dental providers
- Clinical staff:
  - ▶ Provide list of Medicaid enrolled dental providers
  - ▶ Instruct parent/patient on importance of main dental home
  - ▶ Provide referral
- Provider:
  - ▶ Complete referral to main dental home

\*A referral to establish a dental home/main dentist is required beginning at 6 months of age.

## 6. Health Education Including Anticipatory Guidance

### Health Education/Anticipatory Guidance

- Front office/support staff:
  - ▶ Provide office-specific age-appropriate health education and anticipatory guidance materials
- Clinical staff:
  - ▶ Provide office-specific age-appropriate health education and anticipatory guidance materials
  - ▶ Provide additional individualized anticipatory guidance based on topics identified at the time of the checkup
- Provider:
  - ▶ Provide additional individualized anticipatory guidance based on topics identified at the time of the physical exam

### References:

Refer to the [Texas Health Steps Periodicity Schedule](#) for additional information or go to <http://www.onlineordersff.com/images/pdfs/26027.pdf>

Refer to the "[Texas Health Steps Quick Reference Guide](#)" for additional information or go to <http://www.onlineordersff.com/images/pdfs/15308.pdf>

Refer to the "[Texas Health Steps](#)" web site or go to: <https://www.hhs.texas.gov/doing-business-hhs/provider-portals/health-services-providers/texas-health-steps>

Refer to the "[Texas Medicaid Provider Procedures Manual](#)" (TMPPM) or go to: <https://www.tmhp.com/resources/provider-manuals/tmppm>