

Child and Teen Checkups (C&TC) Provider Updates

SPRING 2024

News from the Minnesota Department of Human Services (DHS)

Billing and Claims

Billing for a complete C&TC exam can be complicated. The [MHCP Provider Manual](#) has information including [referral codes](#) and [screening exceptions](#) you may find helpful.

If training or additional assistance is needed, please connect with us at dhs.childteencheckups@state.mn.us.

News from the Minnesota Department of Health (MDH)

Translated Documents

The MDH C&TC [Translated Documents](#) webpage is now live. We received multiple requests and determined there was a demand for these documents to be translated into Arabic, Hmong, Karen, Oromo, Russian, Somali, Spanish, and Vietnamese. Ojibwe is still under review and will be posted at a later date.

The following documents have been translated:

- Adolescent and Young Adult (AYA) Health Questionnaire
- Child and Family Vision History and Risk Assessment Questionnaire
- Child and Family Hearing History and JCIH Risk Assessment Questionnaire

- Color Vision Advisory Letter
- Fluoride Varnish Treatments and Your Child
- Hearing Referral Letter
- HIV and HIV Screening FAQ
- Parent Confidentiality Letter
- Vision Referral Letter

Updated C&TC Fact Sheets

[C&TC Fact Sheets](#) offer the most up-to-date and comprehensive summaries and resources for each C&TC screening component. Providers are encouraged to reference these fact sheets and utilize them as a resource when completing C&TC exams. Each fact sheet discusses C&TC requirements and recommendations, procedures, professional recommendations, and resources.

The MDH C&TC Fact Sheets are currently under review and the updated versions will be posted on our website soon.

TALK: Toolkit for Adolescent Care

The University of Minnesota Prevention Resource Center has developed a series of one-pagers as a part of [TALK: Toolkit for Adolescent Care](#). The TALK tools support primary care providers to discuss sensitive topics with youth and caregivers through one-page conversation starters on twelve topics.

Each one-pager, such as the [Alcohol, Vaping, and Marijuana](#) document, offers providers facts about the topic, conversation starters with teens, and ways for parents to talk with their adolescent.

These practical, user-friendly TALK resources are grounded in scientific research and best practices.

Sports Physicals Into C&TC

Sports physicals are a great time to add a C&TC visit and avoid patients having to return for forms and additional visits. To make a [Sports Qualifying Physical Examination](#) into a complete C&TC visit for ages 11-20 years, add the following additional components:

C&TC Components	Age Requirements
Anticipatory Guidance	Every visit 11-20 years old
Health History: Nutrition, Sleep, Social Determinants of Health	Every visit 11-20 years old
Developmental/Mental Health Surveillance	Every visit 11-20 years old
Physical Exam: Oral Exam and External Genitalia and Sexual Development	Every visit 11-20 years old
Hemoglobin for Youth that are Menstruating	Once 11-20 years old
HIV Screening	Once 15-18 years old
HIV and STI Risk Assessment	Every visit 11-20 years old
Dyslipidemia Risk Assessment	Once 9-11 years old Once 12-16 years old Once 17-20 years old
TB Risk Assessment	Every visit 11-20 years old
Tobacco, Alcohol, and Drug Use Risk Assessment	Every visit 11-20 years old
Hearing and Vision Screening	Once 11-14 years old Once 15-17 years old Once 18-20 years old

C&TC Components	Age Requirements
Verbal Referral to Dentist	Every visit 11-20 years old
HIPPA Compliant Referral Codes	Every visit 11-20 years old

Suicide Risk Screening

The American Academy of Pediatrics recommends [Screening for Suicide Risk in Clinical Practice](#) for all youth ages 12 and above, with anyone screening positive being followed up by [Conducting a Brief Suicide Safety Assessment](#). While suicide risk screening is not yet a recommended component for C&TC visits, it can be incorporated into a mental health screening. View our [Mental Health Fact Sheet](#); updates to the fact sheets will be released later this spring.

Keep Advocating for MMR Vaccine!

MMR vaccine rates in Minnesota are very low, putting us at high risk for a measles outbreak. We have already seen 3 cases of measles in Minnesota this year, and measles cases are much higher than usual across the United States. The percentage of 2-year-olds in Minnesota who had received at least one dose of MMR vaccine by 24 months has declined from 84% in 2019 (pre-pandemic) to 79% in 2023. We need health care providers' help raising our MMR rates!

It is important to continue assessing MMR vaccination status of patients at every visit and vaccinate according to routine MMR recommendations. This is especially important for those traveling internationally, including infants.

MDH also encourages providers to recall those who have previously refused MMR vaccine for their child. The current measles situation is an opportunity to restart conversations with patients about the importance of vaccination. Many parents just need reassurance that the MMR vaccine is safe and will protect their child.

For parents or patients who decline MMR for themselves or their children, counsel them that they could be excluded from childcare/school/work for 21 days or longer if exposed to measles.

Remember, effective January 1, 2022, MHCP covers [Vaccine Counseling](#). Counseling on COVID-19 and routinely recommended vaccines may be provided both in-person and through telehealth. Health care providers cannot bill for vaccine counseling separately if the counseling is a required component of another service provided in the same visit.

Implement "Start at Age 9" Approach in Your Clinic: HPV Vaccination Strategies

Join us for the webinar [Implement "Start at Age 9" Approach in Your Practice: Strategies to Improve HPV Vaccination Rates](#) on May 22, 2024, 12-1 pm! Dr. Vanessa Slots, M.D, a pediatrician from M Health Fairview, will share her experiences starting the HPV vaccine series at age 9, the challenges and solutions she's navigated, and benefits she's experienced in her practice. Come learn how Dr. Slots' experience mirrors core strategies for improving vaccination coverage rates. All clinic staff are welcome and encouraged to join! Everyone from front desk staff and care coordinators to medical assistants and ordering providers play an important role in promoting HPV

vaccination. All attendees will receive CEU credit.

This is the second webinar in our HPV vaccination improvement series. For more information about the program and to access the first webinar's recording, visit [HPV Vaccination Improvement Project](#). This webinar is co-hosted by the Minnesota Department of Health and the American Cancer Society.

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To obtain this information in a different format, call: 651-201-3650.

Resource Links

- [MHCP Provider Manual](https://www.dhs.state.mn.us/main/idc/plg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092)
(https://www.dhs.state.mn.us/main/idc/plg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092)
- [MHCP Provider Manual, Referral Codes section](https://www.dhs.state.mn.us/main/idc/plg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=Latest)
(https://www.dhs.state.mn.us/main/idc/plg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=Latest)

[Released&dDocName=dhs16_150092#hipaa\)](#)

- [MHCP Provider Manual, Screening Exceptions section](#)
(https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092#exceptions)
- [MDH C&TC Translated Documents](#)
(<https://www.health.state.mn.us/people/childreyouth/ctc/translation.html>)
- [MDH C&TC Fact Sheets](#)
(<https://www.health.state.mn.us/people/childreyouth/ctc/factsheets.html>)
- [TALK: Toolkit for Adolescent Care](#)
(<https://prc.umn.edu/talk-toolkit-adolescent-care>)
- [TALK: Alcohol, Vaping, and Marijuana](#)
(<https://prc.umn.edu/sites/prc.umn.edu/files/2021-09/Talk%207%20Alcohol%2C%20Vaping%2C%20Marijuana.pdf>)
- [Sports Qualifying Physical Examination](#)
(<https://www.mshsl.org/sports-qualifying-physical-exam-form-english>)
- [Screening for Suicide Risk in Clinical Practice](#)
(<https://www.aap.org/en/patient-care/blueprint-for-youth-suicide-prevention/strategies-for-clinical-settings-for-youth-suicide-prevention/screening-for-suicide-risk-in-clinical-practice/>)
- [Conducting a Brief Suicide Safety Assessment](#)
(<https://www.aap.org/en/patient-care/blueprint-for-youth-suicide-prevention/strategies-for-clinical-settings-for-youth-suicide-prevention/conducting-a-brief-suicide-safety-assessment/>)
- [MDH C&TC Mental Health Fact Sheet](#)
(<https://www.health.state.mn.us/docs/people/childreyouth/ctc/mentalhealth.pdf>)
- [MCHP Provide Manual, Vaccine Counseling section](#)
(https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=DHS16_136660#VaccineCounseling)
- [Implement "Start at Age 9" Approach in Your Practice: Strategics to Improve HPV Vaccination Rates](#)
(<https://events.gcc.teams.microsoft.com/event/98281055-995f-47af-a0fc-bf3b22e55606@eb14b046-24c4-4519-8f26-b89c2159828c>)
- [HPV Vaccination Improvement Project](#)
(<https://www.health.state.mn.us/people/immunize/miic/iqip/hpv.html>)