



**Samaritan
Health Plans**

InterCommunity Health Network Coordinated Care
Organization
Samaritan Advantage Health Plans (HMO)
Samaritan Choice Plans
Samaritan Employer Group Plans

Physical health clinical practice guideline name:	<i>Recommended Adult and Child Preventive Screening Guideline</i>
Original date approved by QMC:	7/02 IHN; 11/05 SAHP; 5/06 SHPO
Original date approved by UM Committee:	7/25 SHP
Dates re-reviewed by UM Committee:	
Dates re-reviewed by QMC:	7/04 IHN; 11/05 IHN; 5/06 Logo Change; 1/07 SHPO; 10/08 SHPO; 7/09 SHPO; 9/10 SHPO; 7/11 SHPO; 7/12 SHPO; 7/13 SHPO; 9/15 SHPO; 9/16 SHPO; 7/17 SHPO; 7/18 SHPO; 11/19 SHP; 9/20 SHP; 7/21 SHP; 7/22 SHP; 7/23 SHP; 7/24 SHP; 7/25 SHP

Guideline description:

This guideline provides a listing of various types of preventive screenings for adults and children including specific time frames for the screening.

Reference:

USPSTF A and B Recommendations. U.S. Preventive Services Task Force.

<https://uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-a-and-b-recommendations>

These recommendations are designed to be guidelines but do not guarantee coverage by each plan. For coverage/benefit information please contact our Customer Service department.