[INSERT AGENCY NAME AND LOGO]

**FAMILY PLANNING PROGRAM POLICY AND PROCEDURES**

**Preconception Health Screening and Counseling**

1. According to the [Code of Federal Regulations 42 CFR 59.14(a) and 59.5 (b)(1)](https://ecfr.federalregister.gov/current/title-42/chapter-I/subchapter-D/part-59), “Family planning services include preconception counseling, education, and general reproductive and fertility health care, in order to improve maternal and infant outcomes, and the health of women, men, and adolescents who seek family planning services, and the prevention, diagnosis, and treatment of infections and diseases which may threaten childbearing capability or the health of the individual, sexual partners, and potential future children.”
2. [Providing Quality Family Planning Services (QFP)](https://www.cdc.gov/mmwr/pdf/rr/rr6304.pdf) requires that agencies offer preconception health services as a core component of family planning services and describes various components of these services: “Providers of family planning services should offer preconception health services to female and male clients in accordance with CDC’s recommendations to improve preconception health and health care.”

| **Policy Title** | **Preconception Health Screening and Counseling** |
| --- | --- |
| **Effective Date** |  |
| **Revision Dates** |  |
| **Review Due Date** |  |
| **References** | Code of Federal Regulations 42 CFR 59.14(a) and 59.5 (b)(1) <https://ecfr.federalregister.gov/current/title-42/chapter-I/subchapter-D/part-59>  Providing Quality Family Planning Services: Recommendations from the Centers for Disease Control and Prevention and the U.S. Office of Population Affairs (QFP)  <https://www.cdc.gov/mmwr/pdf/rr/rr6304.pdf>  U.S. Preventive Services Task Force (USPSTF) A and B Recommendations <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-and-b-recommendations>  American College of Cardiology <https://www.acc.org/latest-in-cardiology/articles/2017/11/08/11/47/mon-5pm-bp-guideline-aha-2017> |
| **Approved by Signature** |  |
| **Approved Date** |  |

**Purpose:** The purpose of this policy is to describe ***(insert Agency Name)*** process for ensuring compliance with the requirement that Title X grantees and subrecipients offer preconception health services to female and male clients as a core family planning service. These preconception health services must cover the following topics, as further described below: medical history; intimate partner violence; alcohol and other drug use; tobacco use; immunizations; depression; height, weight, and body mass index (BMI); blood pressure; and diabetes.

**Policy:** *[Agency may want to include the following]*

For all clients served by the project (regardless of sex, gender, and age), we will provide the following services, as appropriate:

*For example:*

* Folic acid
  + Counselall females[[1]](#footnote-1) planning or capable of pregnancy about the need to take 0.4–0.8 mg of folic acid daily, in accordance with the [U.S. Preventive Services Task Force (USPSTF) recommendation (Grade A)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/folic-acid-for-the-prevention-of-neural-tube-defects-preventive-medication).
* Reproductive goals
  + Assess reproductive goals and sexual health for all clients. Engage in a client-centered conversation about preconception care, contraception, and/or fertility, as appropriate.
* Female medical history
  + In accordance with the QFP, obtaina medical history from females that includes the following:
    - Reproductive history
    - History of poor birth outcomes (i.e., preterm, cesarean delivery, miscarriage, and stillbirth)
    - Environmental exposures, hazards, and toxins (e.g., tobacco, alcohol, and other drugs)
    - Medications that are known teratogens
    - Genetic conditions
    - Family history
* Male medical history
  + In accordance with the QFP, obtain a medical history from males that includes the following:
    - Medical and surgical history that might impair reproductive health (e.g., genetic conditions, including sickle cell disease or trait)
    - History of reproductive failures or conditions that can reduce sperm quality, such as obesity, diabetes mellitus, and varicocele
    - Environmental exposures, hazards, and toxins (e.g., tobacco, alcohol, and other drugs)
* Intimate partner violence
  + Screen females for intimate partner violence and provide or refer clients who screen positive to intervention services, in accordance with the [USPSTF recommendation (Grade B)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/intimate-partner-violence-and-abuse-of-elderly-and-vulnerable-adults-screening).
* Alcohol and other drug use
  + Screen all clients for [alcohol](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/unhealthy-alcohol-use-in-adolescents-and-adults-screening-and-behavioral-counseling-interventions) and [other drug use](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/drug-use-illicit-screening) in accordance with the USPSTF recommendation (Grade B for ages 18+, Grade I for ages 12–17), and provide behavioral counseling interventions, as indicated.
* Tobacco use
  + Screen for tobacco use in accordance with USPSTF recommendations:
    - For adults who use tobacco products, provide or refer for tobacco cessation interventions, including brief behavioral counseling sessions (<10 minutes) and pharmacotherapy delivered in primary care settings [(Grade A)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/tobacco-use-in-adults-and-pregnant-women-counseling-and-interventions).
    - For adolescents who don’t use tobacco products, provide intervention to prevent initiation of tobacco use [(Grade B)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/tobacco-and-nicotine-use-prevention-in-children-and-adolescents-primary-care-interventions).
    - For adolescents who use tobacco products, provide brief behavioral counseling sessions (<10 minutes) (Grade I).
* Immunizations
  + Screen for immunizations in accordance with the recommendations of the [Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices](https://www.cdc.gov/vaccines/acip/recommendations.html):
    - For all clients, screen for age-appropriate vaccinations, such as influenza; tetanus–diphtheria–pertussis (Tdap); measles, mumps, and rubella (MMR); varicella; pneumococcal; and meningococcal.
    - For females who are uncertain about MMR immunization, offer a rubella titer on site or by referral.
  + Offer vaccination, as indicated, and/or provide referrals to community providers for immunization.
* Depression
  + Screen all [adult](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/depression-in-adults-screening) and [adolescent](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/depression-in-children-and-adolescents-screening) clients for depression using a validated tool [e.g., Patient Health Questionnaire (PHQ-9) or Edinburgh Postpartum Depression Screening (EPDS)], document findings, and refer for behavioral therapy as appropriate (Grade B).
* Obesity
  + Screen all [adult](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/obesity-in-adults-interventions) and [adolescent](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/obesity-in-children-and-adolescents-screening) clients for obesity in accordance with the USPSTF recommendation (Grade B).
  + For adults with obesity, provide or refer for intensive counseling and behavioral interventions to promote sustained weight loss (Grade B).
* Hypertension
  + Screen all clients routinely for hypertension in accordance with the USPSTF recommendation [(Grade A)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/hypertension-in-adults-screening) and with American College of Cardiology/American Heart Association guidelines:
    - Screen clients with blood pressure less than 120/80 every 1–2 years.
    - Screen clients with systolic blood pressure greater than or equal to 120 and/or diastolic blood pressure greater than or equal to 80 every year.
* Diabetes
  + Screen for diabetes in accordance with the USPSTF recommendation [(Grade B)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/screening-for-abnormal-blood-glucose-and-type-2-diabetes):
    - Screen for diabetes in adults aged 40–70 years who are overweight or obese, and refer clients with abnormal glucose levels to primary care providers for further evaluation.

**Procedure:** *[Agency may want to include the following]*

* Location of clinical protocols that document the services referenced in this policy.
* Descriptions of collaborative agreements with relevant referral agencies, including: emergency care providers, HIV/AIDS care and treatment providers, infertility specialists, primary care providers, and chronic disease management providers.
* How and where staff are notified about this policy (e.g., statement signed by employee, staff circulars, training records, orientation checklist, etc.) at the grantee, subrecipient, and service site levels.
* Grantee’s process for monitoring subrecipients and service sites to ensure compliance with this requirement.
* How staff will be trained and updated on changes to this policy.
* How staff can access this policy (location of paper/electronic version(s)).

Reviewed: *DATE*

Revised: *DATE*

1. Note:This policy uses gendered language and terminology throughout, including “male” and “female.” To align with the QFP and USPSTF guidelines (see above references), this policy mirrors the gendered language used in these guidelines. References to “male” in this policy generally refer to individuals assigned male at birth, while references to “female” generally refer to individuals assigned female at birth. In practice, service sites should ask patients their pronouns and address them as such. [↑](#footnote-ref-1)