



# Assessing Child Maladaptive Behaviors: Highlights of the New Clinical Practice Guidelines for ADHD

In 2019, the American Academy of Pediatrics (AAP) changed the [clinical practice guidelines \(CPGs\) for attention-deficit/hyperactivity disorder \(ADHD\)](#). The main changes are:

- A new action statement for the diagnosis and treatment of comorbidity.
- An updated process of care algorithm

Comorbidity is important because ADHD often happens at the same time as other issues. Follow up with your patients upon prescribing ADHD medications.

## Key action statements (KASs)

Below are the KASs for Comorbidity and Managing Comorbidity:

- Comorbidity – “In the evaluation of a child or adolescent for ADHD, the primary care clinician (PCC) should include a process to at least screen for comorbid conditions, including emotional or behavioral conditions (e.g., anxiety, depression, oppositional defiant disorder, conduct disorders, substance use), developmental conditions (e.g., learning and language disorders, autism spectrum disorders), and physical conditions (e.g., tics, sleep apnea).”
- Managing Comorbidity – “The PCC, if trained or experienced in diagnosing comorbid conditions, may initiate treatment of such conditions or make a referral to an appropriate subspecialist for treatment. After detecting possible comorbid conditions, if the PCC is not trained or experienced in making the diagnosis or initiating treatment, the patient should be referred to an appropriate subspecialist to make the diagnosis and initiate treatment.”
- Magellan Behavioral Healthcare manages our mental and behavioral health care services. You can reach Magellan at 1-800-327-7390 or go to the [Behavioral Health Toolkit for Medical Providers](#) for help with comorbid conditions.

## Action: Follow up with children starting ADHD medications

We want to improve the outcomes of children 6 to 12 years old who have started taking ADHD medication. Only 20% of members in the STAR, CHIP, and STAR Kids programs complete important follow-up care visits. We want to increase visits by 10 to 20 percent. **Upon prescribing ADHD medications, please schedule in-person follow-up care within 30 days.**

## Resources

These resources can help you support members managing ADHD and other mental and behavioral health issues:

- [Implementing the Key Action Statements of the AAP ADHD Clinical Practice Guidelines: An Algorithm and Explanation for Process of Care for the Evaluation, Diagnosis, Treatment, and Monitoring of ADHD in Children and Adolescents](#)
  - [Barriers addressed](#): limited access; inadequate payment; practice challenges; fragmented care and communication
- Bright Futures ([Introduction](#) and [Mental Health](#) sections)
- [Enhancing Pediatric Mental Health Care: Algorithms for Primary Care](#)
- [Enhancing Pediatric Mental Health Care: Strategies for Preparing a Primary Care Practice](#)
- [The Future of Pediatrics: Mental Health Competencies for Pediatric Primary Care \(AAP\)](#)
- [AAP Mental Health Initiatives website](#)

By clicking this link, you will go to a new website/app (“site”). This new site may be offered by a vendor or an independent third party. The site may also contain non-Medicare related information. In addition, some sites may require you to agree to their terms of use and privacy policy.

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association