

The Board of Pensions administers the Benefits Plan of the Presbyterian Church (U.S.A.), offering retirement, healthcare, death, and disability benefits to qualifying members. The Board also provides financial and vocational grants through the Assistance Program.

Summary

Medical Plan members who are covered by Highmark Blue Cross Blue Shield and adopt children from overseas can take advantage of a provision designed to meet the unique health needs of children from other countries. This benefit is available for children through age 18. (Triple-S enrollees should consult their plan's provisions for information about covered preventive health services.)

Overseas medical exam

Infants and children being adopted from other countries must have a medical exam overseas by a designated physician to detect contagious diseases that may affect their eligibility to obtain a visa. If they are ill or infected, they may be issued a visa after effective treatment. Requirements include:

- for children 15 and younger, a chest X-ray for tuberculosis (TB) and blood tests for syphilis and HIV
- for children older than 15, tests are given if disease is suspected

Children older than 11 may be exempted from this regulation. Instead, their adoptive parents sign a waiver indicating intention to comply with required medical examinations within 30 days after a child's arrival in the United States.

Exams and screenings in the United States

Children adopted from other countries should undergo a thorough health exam by a pediatrician within one to two weeks of their arrival in the United States, but children with chronic conditions should be seen immediately. Although children may actually show no symptoms of TB, parasites, hepatitis B, lead poisoning, or growth failure from a dysfunctional thyroid, they may have any or all of these conditions.

Physicians can accept records of prior immunizations only if the vaccine type, date of administration, number of doses, intervals between doses, and age of the patient at the time of administration are comparable to the U.S. schedules. After initial screening is completed, it is necessary to retest children for some diseases. The health exam should include the following screenings and tests:

- hepatitis A screen for previous immunity in children who will live in high-risk areas of the United States (if needed, initiate vaccination series)
- hepatitis B screen, including hepatitis B surface antigen, hepatitis B surface antibody, and hepatitis B core antibody (children should be retested six months after the initial screenings)
- hepatitis C screen for children from Asia, Eastern Europe, and Africa
- hepatitis D (available at the Centers for Disease Control and Prevention) for children from the Mediterranean area, Africa, Eastern Europe, and Latin America who have chronic infection with hepatitis B virus
- HIV ELISA and PCR screen Mantoux tuberculin skin test
- stool examination for ova and parasites, giardia antigen, and bacterial culture (three specimens, obtained 48 hours apart, are strongly recommended, especially if the child is from an orphanage)
- complete blood count (CBC) (a hemoglobin electrophoresis is recommended for children who are anemic and at risk for abnormal hemoglobins, such as children of African, Asian, or Mediterranean descent)
- lead level
- blood screen for syphilis
- TSH to rule out low thyroid levels
- G6PD deficiency screening to detect this enzyme deficiency in children from Asia, the Mediterranean, and Africa; PPD to evaluate for tuberculosis
- urinalysis dipstick
- diphtheria and tetanus antibody profile may be done if vaccines were given to verify immunity
- calcium, phosphatase, alkaline phosphatase, and rickets survey if there is a suspicion of rickets
- repeat testing for hepatitis B, hepatitis C, HIV, and tuberculosis (with a repeat PPD test)

Other recommended screening tests

- Hearing screen by audiometry or BSER (Many previously institutionalized children have been diagnosed with ear infections after their arrival in the United States. Early intervention ensures proper language development and hearing augmentation.)
- Vision screen and evaluation by an ophthalmologist (In many countries it is not known whether the mother had infections during childbirth that could have affected the child's vision.)
- Developmental screen
- Dental evaluation for children 18 months and older

Note to prospective parents

Before traveling overseas, parents and household members should check to see that they have either a history of natural disease or they have been vaccinated against measles. Individuals born after 1957 should receive two doses of measles vaccine. If not, they should update their vaccines before traveling. In addition to making sure that all immunizations are up to date, travelers should take precautions such as getting proper rest, food, and water and guarding against insect exposure to protect their health.

Adoption grant

A family adopting a child may be eligible for an Adoption Assistance Grant through the Assistance Program of the Board of Pensions. For information, read about Adoption Assistance Grants on pensions.org or call the Board of Pensions at 800-773-7752 (800-PRESPLAN) to speak with a service representative.

This is not a full description of benefits and limitations of the plan. If there is any difference between the information presented here and the provisions of the Benefits Plan of the Presbyterian Church (U.S.A.), the plan terms will govern. Visit pensions.org or call the Board at 800-773-7752 (800-PRESPLAN) for a copy of the plan document.

