Early and Periodic Screening, Diagnostic and Treatment Services (EPSDT): Bright Futures

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Overview

Introduction to EPSDT -

- History of EPSDT
- State Responsibilities and Mandates
- Comprehensive Well Care
- Questions and answers
Foundation of the EPSDT Benefit

Statutory, CFR and CMS Publication References for the Benefit

- 42 U.S.C. §§ 1396a(a)(10)(A), 1396a(a)(43),
- 1396d(a)(4)(B), 1396d(r)
- 42 C.F.R. §§ 441.50-441.62
- CMS, State Medicaid Manual, part 5
Early and Periodic Screening

“Children's health problems should be addressed before they become advanced, challenging or debilitating and before treatment becomes difficult and more costly.”

§1905(r): States must provide “Early and Periodic Screening, Diagnostic and Treatment Services” to ‘Correct or Ameliorate’ Diagnosed Physical, Behavioral or Developmental Health Conditions and Defects”

- Individualized care.
- Coverage for acute, chronic and developmental problems.
- Broad, Federally Defined Menu of Medical Care
- National Standard of Review for Medical Necessity.
Early and Periodic Screening

EPSDT covers regular screening services (check-ups) for infants, children and adolescents. These screenings are designed to identify health and developmental issues as early as possible.

States have the responsibility to ensure that all eligible children (and their families) are informed of both the availability of screening services, and that a formal request for an EPSDT screening service is not required.
Early and Periodic Screening

States must provide or arrange for screening services both at established times and on an as-needed basis. Covered screening services are medical, mental health, vision, hearing and dental. Medical screenings has five components:

1. Comprehensive health and developmental history that assesses for both physical and mental health, as well as for substance use disorders;
2. Comprehensive, unclothed physical examination;
3. Appropriate immunizations, in accordance with the schedule for pediatric vaccines established by the Advisory Committee on Immunization Practices;
4. Laboratory testing (including blood lead testing;
5. and Health education and anticipatory guidance for both the child and caregiver
Periodicity Schedule - Physical

Under the Act, states must establish a periodicity schedule for each type of screening service: medical, vision, hearing, and dental. The periodicity schedules set the frequency by which certain services should be provided and will be covered.

The schedules are not prescribed by federal law, but should be based on current standards of pediatric medical and dental practice, and states are required to consult with recognized medical and dental organizations involved in child health care to assist in developing their periodicity schedules.

One commonly used source is Bright Futures (developed by the American Academy of Pediatrics)
Periodicity Schedule - Oral Health

The American Academy of Pediatric Dentistry (AAPD) has published a recommended periodicity schedule for dental services for children and adolescents.

- First visit to happen at the eruption of the first tooth

Keep your child’s teeth healthy
For dental tips, visit www.cdc.gov/oralhealth
Bright Futures

Bright Futures is a national health promotion and prevention initiative, led by the American Academy of Pediatrics and supported, in part, by the US Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB).

- Materials and Tools
  - Clinical practice tools, including:
    - Tip sheets
    - EHR options
    - Coding resources
  - Materials for families, including:
    - Educational handouts
    - Pocket guides
Bright Futures

Bright Futures Periodicity Schedule

Highlights include:

- History
- Measurements
- Vision and hearing screenings
- Developmental/Social/Emotional/Mental Health
- Testing - newborn blood, blood lead, anemia
- Immunizations
- Oral Health - fluoride varnish
Just What IS an ‘EPSDT Service’?

Regular Preventive Care, a Robust Menu of Medical Care and a Pediatric Standard of Medical Necessity add up to: Early identification and integrated treatment of kids’ health problems!

“the right care”
“to the right child”
“at the right time”
“in the right setting”
Medicaid’s Benefit for Children: EPSDT

**EPSDT Is**
- A comprehensive healthcare plan focused on prevention and early treatment.
- A flexible plan with a menu of benefits available to be tailored to children’s individual and developmental needs, not to private insurer benchmarks.

**EPSDT Is NOT**
- A special funding program.
- A stand-alone coverage with a special application process.
- A freestanding funding source for a limited class of services.
How Does EPSDT Make Medicaid Better?

The rules found in the federal Medicaid Act direct state agencies to:

1. Administer its benefit for children and youth ages 20 and under old in a consistent manner no matter the delivery model, and
2. Assure comprehensive, preventive coverage and effective medical treatment that is tailored to the unique needs of every Medicaid enrolled child.
THANK YOU.

Questions?
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