Section 11.0 - Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Program

11.1.1  Introduction
11.2.1  Scope
11.3.1  Objective
11.4.1  Procedure
11.4.1-A.  Requirements for EPSDT Providers
11.4.1-B.  Health Education
11.4.1-C.  Periodic Screenings
11.4.1-D.  Nutritional Assessment & Nutritional Therapy
11.4.1-E.  Pediatric Immunizations/Vaccines for Children Program
11.4.1-F.  Body Mass Index (BMI)
11.4.1-G.  Eye Examinations and Prescriptive Lenses
11.4.1-H.  Hearing/Speech Screening
11.4.1-I.  Dental Screening and Referrals
11.4.1-J.  Tuberculin Skin Testing
11.4.1-K.  Children’s Rehabilitative Services (CRS)
11.4.1-L.  AHCCCS Office of Special Programs
11.5.1   References

10.1.1  Introduction
The Early and Periodic Screening, Diagnostic and Treatment program (EPSDT) is a comprehensive child health program of prevention, treatment, correction, and improvement (amelioration) of physical and mental health problems for members under the age of 21 as described in 42 USC 1396d (a) and (r). However, the EPSDT program services will be provided to the Integrated SMI members who are 18, 19 and 20 years of age. The EPSDT program is governed by federal and state regulations and community standards of practice.

10.2.1  Scope
All PCPs who provide primary care services to SMI members age 18-20.

10.3.1  Objective
To provide required information regarding the EPSDT program to participating PCPs contracted with Mercy Maricopa Integrated Care (Mercy Care).

10.4.1  Procedure
All PCPs who provide services to SMI members age 18-20 are required to provide comprehensive health care, screening and preventive services, including, but not limited to:
- Primary prevention;
- Early intervention;
- Diagnosis; and
All services required to treat or improve a defect, problem or condition identified in an EPSDT screening.

A well-child visit is synonymous with an EPSDT visit and includes all screenings and services described in the AHCCCS EPSDT and Dental periodicity schedules.

Please refer to the Mercy Maricopa’s website for Claims Coding for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) and Well-Child Visits under Notices section for specific claim codes.

11.4.1-A. Requirements for EPSDT Providers
PCPs are required to comply with regulatory requirements and Mercy Maricopa preventative requirements which include:

- Documenting immunizations into Arizona State Immunization Information System (ASIIS) and enroll every year in the Vaccine for Children Program.
- Providing all screening services according to the AHCCCS Periodicity Schedule and community standards of practice. The Periodicity Schedule can be viewed by accessing the AHCCCS’ website at: http://azahcccs.gov/shared/Downloads/MedicalPolicyManual/Chap400.pdf
- Using current AHCCCS standardized EPSDT tracking forms to document services provided and compliance with AHCCCS standards. The EPSDT Tracking Forms are available under the Forms section on Mercy Maricopa’s website.
- Sending copies of EPSDT Tracking forms to Mercy Maricopa on a monthly basis. Please send forms by mail to:
  4350 E. Cotton Center Blvd., Bldg. D
  Phoenix, AZ  85040
  Attn: Quality Management
  Or fax the forms to 860-975-3613
- Using all clinical encounters to assess the need for EPSDT screening and/or services.
- Documenting in the medical record the member’s decision not to participate in the EPSDT program, if appropriate.
- Referring Mercy Maricopa members to Children’s Rehabilitative Services (CRS) when they have conditions covered by the CRS program.
- Making referrals for diagnosis and treatment when necessary and initiate follow-up services within 60 days.
- Reporting all EPSDT encounters on required claim forms, using the Preventive Medicine Codes.
- Initiating and coordinating referrals to behavioral health providers as necessary.

An EPSDT screening includes the following basic elements:

- Comprehensive health and developmental history, including growth and development screening (includes physical, nutritional and behavioral health assessments).
Comprehensive unclothed physical examination.
Appropriate immunizations according to age and health history.
Laboratory tests appropriate to age and risk for the following: blood lead, tuberculosis skin testing, anemia testing and sickle cell trait.
Health education and counseling about child development, healthy lifestyles and accident and disease prevention.
Appropriate dental screening and referral.
Appropriate vision and hearing/speech testing.
Obesity screening using the BMI percentile for children.
Anticipatory guidance.

11.4.1-B. Health Education
The PCP is responsible for ensuring that health counseling and education are provided at each EPSDT visit. Anticipatory guidance should be provided so that parents or guardians know what to expect in terms of the child's development. In addition, information should be provided regarding accident and disease prevention, and the benefits of a healthy lifestyle.

Screenings
11.4.1-C. Periodic Screenings
The AHCCCS EPSDT Periodicity Schedule specifies the screening services to be provided at each stage of the child's development. The AHCCCS EPSDT Periodicity Schedule (Exhibit 430-1) can be viewed at the AHCCCS website, http://azahcccs.gov/shared/Downloads/MedicalPolicyManual/Chap400.pdf under Policy 430. This schedule follows the Center for Disease Control (CDC) recommendation. Children may receive additional inter-periodic screening at the discretion of the provider. Mercy Maricopa does not limit the number of well-child visits that members under age 21 receive. Claims should be billed with the following CPT/ICD-9-CM Diagnosis Codes based on age appropriateness:

<table>
<thead>
<tr>
<th>CPT</th>
<th>ICD-9-CM Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>99383-99385, 99393-99395</td>
<td>V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9</td>
</tr>
</tbody>
</table>

Well Child Visits for sports and other activities should be based on the most recent EPSDT Well Child Visit, as the annual Well Child Visits are comprehensive and should include all of the services required for sports or other activities. AHCCCS does not cover sports or other physicals solely for that purpose. If it can be combined with a regularly scheduled EPSDT visit, it is covered, though no additional payment would be allowable for completing the school or other organization paperwork that would allow the child to participate in the activity.
11.4.1-D. Nutritional Assessment & Nutritional Therapy
Mercy Maricopa covers nutritional therapy for EPSDT members on an enteral, parenteral or oral basis when determined medically necessary to provide either complete daily dietary requirements, or to supplement a member’s daily nutritional and caloric intake. The following requirements apply:

- Nutritional therapy requires prior authorization and approval by the Mercy Maricopa Medical Director.
- Once prior authorization has been attained, a fully completed Certificate of Medical Necessity for Commercial Oral Nutritional Supplements form should be filled out and sent directly to the Durable Medical Equipment provider for handling. The form is available at Mercy Maricopa’s website under the Forms section or is also available on the AHCCCS website at: [http://azahcccs.gov/shared/Downloads/MedicalPolicyManual/Chap400.pdf](http://azahcccs.gov/shared/Downloads/MedicalPolicyManual/Chap400.pdf)

11.4.1-E. Pediatric Immunizations/Vaccines for Children Program
EPSDT covers all child and adolescent immunizations. Immunizations must be provided according to the Advisory Committee on Immunization Practices (ACIP) guidelines and be up-to-date. Providers are required to coordinate with the Arizona Department of Health Services’ (ADHS) Vaccine for Children Program (VFC) to obtain vaccines for Mercy Maricopa members who are 18 years of age.

Additional information can be attained by calling VFC at 602-364-3642 or by accessing their website at [http://www.azdhs.gov/phs/immun/act_aipo.htm#vfc](http://www.azdhs.gov/phs/immun/act_aipo.htm#vfc).

Arizona law requires the reporting of all immunizations administered to children under 19 years old. Immunizations must be reported at least monthly to ADHS. Reported immunizations are held in a central database, the Arizona State Immunization Information System (ASIIS) that can be accessed online to obtain complete, accurate records.

11.4.1-F. Body Mass Index (BMI)
Providers should calculate each child’s BMI starting at each EPSDT visit. Body mass index is used to assess underweight, overweight, and those at risk for overweight. BMI for children is gender and age specific. PCPs are required to calculate the child’s BMI and percentile. Additional information is available at the CDC website, [www.cdc.gov/nccdphp/dnpa/bmi/bmi-for-age.htm](http://www.cdc.gov/nccdphp/dnpa/bmi/bmi-for-age.htm).
The following established percentile cutoff points are used to identify underweight and overweight in children:

<table>
<thead>
<tr>
<th>Condition</th>
<th>BMI Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight</td>
<td>BMI-for-age &lt; 5th percentile</td>
</tr>
<tr>
<td>At risk of overweight</td>
<td>BMI-for-age 85th percentile to &lt; 95th percentile</td>
</tr>
<tr>
<td>Overweight</td>
<td>BMI-for-age &gt; 95th percentile</td>
</tr>
</tbody>
</table>

If a child is determined to be below the 5th percentile, or above the 85th percentile, the PCP should provide guidance to the member and the member’s parent or guardian regarding diet and exercise for the child. Additional services may be provided or referrals made if medically necessary.

### 11.4.1-G. Eye Examinations and Prescriptive Lenses
EPSDT includes eye exams and prescriptive lenses to correct or ameliorate defects, physical illness and conditions. PCPs are required to perform basic eye exams and refer members to the contracted vision provider for further assessment.

### 11.4.1-H. Hearing/Speech Screening
Hearing evaluation consists of appropriate hearing screens given according to the EPSDT schedule. Evaluation consists of history, risk factors, parental questions and impedance testing.
- Pure-tone testing should be performed when medically necessary.
- Speech screening shall be performed at each EPSDT visit.

### 11.4.1-I. Dental Screening and Referrals
Oral health screenings are to be conducted at every EPSDT visit.

In addition to the screening, members must be referred to a dentist at least annually. Documented dental findings and treatment must be included in the member’s medical record in the PCP’s office. Depending on the results of the oral health screening, referral to a dentist should be made according to the following timeframes:
- **Urgent** - (Within 24 hours) Pain, infection, swelling and/or soft tissue ulceration of approximately two weeks duration or longer
- **Early** - (Within three weeks) Decay without pain, spontaneous bleeding of the gums and/or suspicious white or red tissue areas
- **Routine** - (Next regular checkup) none of the above problems identified

The member or the member’s parent or guardian may also self-refer and schedule dental appointments for the member with any Mercy Maricopa contracted general dentist. They may go directly to the dentist without seeing the PCP first and no authorization is required.
11.4.1-J.  Tuberculin Skin Testing
Tuberculin skin testing should be performed as appropriate to age and risk. –Members at increased risk of tuberculosis (TB) include those who have contact with persons:
- Confined or suspected of TB;
- In jail during the last five years;
- Living in a household with an HIV-infected person or the child is infected with HIV; and
- Traveling/emigrating from, or having significant contact with persons indigenous to, endemic countries.

State Programs
11.4.1-K.  Children’s Rehabilitative Services (CRS)
CRS services are contracted through United HealthCare Community Plan CRS by the AZ Department of Health Services to administer the Children’s Rehabilitation Services (CRS) program. United Healthcare is responsible to provide oversight for quality of care, prior authorization for services provided to CRS eligible children for CRS eligible conditions provided by CRS contracted providers and clinics, utilization management, and claims payment for services provided through a CRS Clinic or CRS practitioner.

United Healthcare is responsible for all other services for CRS members, including EPSDT screenings and well-child visits, immunizations, and medical services for a member’s illness or injury.

To contact United Healthcare for more information about their administration of CRS services as well as other services, visit their website at: http://www.uhccommunityplan.com/health-professionals/AZ/provider-information

You may also call United Healthcare at 602-417-7100 or 800-334-5823.

Complete an Application/Referral Form available on the above referenced website and submit with:
- A completed CRS application
- A copy of the member’s medical record

Eligibility requirements include a condition that requires comprehensive multi-disciplinary care and is a condition that has a reasonable potential for rehabilitation. Examples of medical conditions covered under the CRS program include:
- Club foot
- Scoliosis
- Cerebral palsy
- Cleft lip/palate
Cystic Fibrosis
Spina Bifida
Neurofibromatosis
Metabolic diseases (Phenylketonuria, Galactosemia)

### 11.4.1-L. AHCCCS Office of Special Programs

Children who have been diagnosed with the following genetic metabolic conditions and who need medical foods may receive services directly through the AHCCCS Office of Special Programs. AHCCCS covers medical foods, within the limitations specified in the AHCCCS Medical Policy Manual (AMPM), Chapter 320-H, titled Medical Foods, for any member diagnosed with one of the following inherited metabolic conditions:

- Phenylketonuria
- Homocystinuria
- Maple Syrup Urine Disease
- Galactosemia (requires soy formula)
- Beta Keto-Thiolase Deficiency
- Citrullinemia
- Glutaric Acidemia Type I
- 3 Methylcrotonyl CoA Carboxylase Deficiency
- Isovaleric Acidemia
- Methylmalonic Acidemia
- Propionic Acidemia
- Arginosuccinic Acidemia
- Tyrosinemia Type I
- HMG CoA Lyase Deficiency
- Cobalamin A, B, C Deficiencies

**Metabolic Disorder Medical Foods – Coverage Entity:**

- Members receiving EPSDT and KidsCare services that have been diagnosed with a metabolic disorder included in the AMPM, Chapter 320-H, Medical Foods, are eligible for services through CRS.
- Members receiving EPSDT services and KidsCare members must receive metabolic formula through CRS.
- Members receiving EPSDT services and KidsCare members who require modified low protein foods receive them through AHCCCS Administration.
- AHCCCS Administration is responsible for providing both necessary metabolic formula and modified low protein foods for members 21 years of age and older who have been diagnosed with one of the inherited metabolic disorders included in the AMPM, Chapter 320-H, Medical Foods section.
- Mercy Maricopa is responsible for initial and follow-up consultations by a genetics physician and/or a metabolic nutritionist, lab tests and other services related to the provision of
medical foods for enrolled members diagnosed with a metabolic disorder included in the AMPM, Chapter 320–H, Medical Foods section.

Further information can be obtained by contacting the Office of Special Programs at 602-417-4053 or by referring to the AHCCCS Medical Policy Manual and referring to Chapter 320-H, Medical Foods.

11.5.1 References
The following citations can serve as additional resources for this content area:
42 USC 1396d (a) and (r)
AHCCCS Medical Policy Manual, Chapter 320-H
AHCCCS Medical Policy Manual, Chapter 400