

AETNA

EPSDT PROVIDER WEBINAR

TAPE: EPSDT PROVIDER WEBINAR

- Jennifer Largen: [00:00:02] Hello, and welcome to Aetna Better Health of Kansas's presentation of Early and Periodic Screening, Diagnostic, and Treatment services, otherwise known as EPSDT. This is the Medicaid program's benefit for children and adolescents. My name is Jennifer Largen, and I work in our quality department. As a nurse, I understand the importance of regular preventative care, and I'm eager to share this presentation with you today.
- [00:00:25] EPSDT provides a comprehensive array of prevention, diagnostic, and treatment services for low-income infants, children, and adolescents under the age of 21, as specified in section 1905R of the Social Security Act. The EPSDT benefit is more robust than the Medicaid benefit for adults, and is designed to ensure that children receive early detection and care, so that health problems are averted or diagnosed and treated as early as possible.
- [00:00:57] Aetna Better Health of Kansas is committed to ensuring that the children we serve receive the healthcare they need when they need it. The right care, to the right child, at the right time, and in the right setting.
- [00:01:11] EPSDT was enacted in 1967 as part of the Medicaid – as part of Medicaid, as the child health component with a deliberate focus on prevention and early intervention to reduce health problems among children under age 21, who are enrolled in Medicaid and provide them appropriate health screenings and services. In a 2010 report, the U.S. Health and Human Services Inspector General found that three out of four children did not receive all required medical, vision, and hearing screenings under EPSDT.
- [00:01:43] As a reminder, these five components of an EPSDT screen includes medical treatment and medical necessity, dental, vision, hearing, and mental health. Moreover, the same report showed that nearly 60% of children who received EPSDT medical screenings were missing at least one of these five components. While we're here, I want to make a brief note

about the Children's Health Insurance program. Known as CHIP, this program was created in 1997, and re-authorized in 2009.

- [00:02:17] It also expands health insurance coverage to targeted, uninsured, low-income children with family incomes below 200% of the federal poverty level. The program provides states with federal funding to expand health insurance beyond Medicaid eligibility levels. In Kansas, CHIP is administered as part of the Medicaid program, and the covered children, and eligible for EPSDT benefits.
- [00:02:44] Aetna Better Health of Kansas monitors the EPSDT services our members receive. Additionally, Aetna supports our providers by raising member awareness of these services through mailers sent to members annually, and through a text messaging campaign. If EPSDT rates are low, then Aetna performs additional outreach and engagement to our members.
- [00:03:10] The next slides break down the services covered, and the goals of the EPSDT program. So, the E stands for Early. This is assessing and identifying problems early. Prevention helps ensure the early identification, diagnosis, and treatment of conditions before they become more complex and difficult to treat.
- [00:03:29] P, periodic. Checking a children's health at age-appropriate times. Each state has its own schedule for recommended check-ups at each age. Kansas follows the American Academy of Pediatrics Bright Future Guidelines. And you can find a link to this schedule at the bottom of this slide.
- [00:03:49] S, screening. Provides physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems. D, diagnosis. Performing tests to follow up when a health risk is identified. This also includes referrals to additional services so the child receives all the necessary treatment. T, treatment, is provided to control, correct, or reduce health problems that are found.
- [00:04:19] EPSDT, as a set of benefits, offers a comprehensive approach to medical, dental, and mental healthcare for children, which emphasizes prevention and early intervention. The core of the EPSDT benefit is a comprehensive, well-child visit known as an EPSDT screen. It must include a comprehensive health and developmental history, comprehensive physical exam, appropriate immunizations, laboratory tests, and health education or anticipatory guidance.

- [00:04:52] If your office has any questions on coding for an EPSDT visit, please contact our office at 1-855-221- 5656. Again, that's 1-855-221-5656 and ask to speak to your provider relations representative. Aetna encourages additional support for the family by addressing social determinants of health, including screening for risks such as living situation, food insecurity, environmental, or tobacco exposure, and for strengths and protective factors such as family support.
- [00:05:33] Referring parents to community agencies can help with concerns regarding living conditions. Additionally, we want to remind you that weekend SNAP benefits are available to help with food security concerns. Aetna encourages your use of Z codes when billing the claim which supports Aetna's ability to provide services that are tailored to the members' needs regarding social determinants of health.
- [00:06:01] Assess a child's health needs through initial and periodic examinations and evaluations. For example, this may be called a preventative care visit, a Kan-Be-Healthy visit, or a Well Child visit. Assure that health problems are diagnosed and treated early before they become more complex. For example, immunizations. Members may need help to know if their immunizations are up to date, or what do they need to do to become up to date? All immunizations should be documented in Kansas Web IZ.
- [00:06:34] If your office refers patients to a local health department for immunizations, then Aetna recommends your office includes specific documentation on which immunization the patient needs, and include immunizations such as the flu or HPV as applicable. The Kan-Be-Healthy form or Well Child visit form is the EPSDT screening form for Kansas. The link to this form can be found on this PowerPoint.
- [00:07:02] The following slides show some of the examples of appropriate screenings. So, we screen for anemia, developmental delay, and autism screenings. Blood lead level screenings. As a reminder, the questionnaire doesn't count as a blood lead screening. These screenings need to be either venous or capillary.
- [00:07:22] Vision. Vision screening by the PCP and referral to a specialist, if needed, includes the diagnosis and treatment for defects in vision, and eyeglasses, when appropriate. Vision services must be provided according to a distinct and separate periodicity schedule developed by the state, and other intervals as medically necessary.

- [00:07:44] Hearing screenings include screenings by the PCP and referral to a specialist, as needed. At the minimum, hearing services should include the diagnosis and treatment for defects in hearing, including the provision of hearing aids. Speech, language, and hearing services, are related, and are covered when medically necessary.
- [00:08:02] We don't want to forget mental health. Children's mental health services are an integral part of the design and scope of EPSDT. Federal law requires screening for potential developmental, mental, behavioral, and or substance use disorders. EPSDT also covers diagnostic and treatment services if medically necessary for these conditions. In Kansas, contracts with managed care organizations and community mental health centers to deliver mental health services.
- [00:08:32] Dyslipidemia, dental. Dental services must meet standards of dental practice and include services to relieve pain, restoration of teeth, and maintenance for dental health. Medical care providers should provide direct referral to a dentist as part of the EPSDT screening visit. If a condition requiring treatment is discovered for a child, EPSDT provides financing for nearly all medically necessary dental services. And I also want to mention chlamydia. We encourage you to screen as appropriate.
- [00:09:11] The physical exam must be comprehensive and unclothed to meet the criteria. Many times, a provider may only see a member for a sick visit. Don't miss the opportunity to provide EPSDT services during the visit by incorporating the above-mentioned components of disease detection, disease prevention, health promotion, and anticipatory guidance. Developmental surveillance, assessment at specific age-appropriate physical development milestones, such as social language, verbal language, gross motor, and fine motor development. Psychosocial or behavioral assessment. Mental development history includes the assessment of specific age-appropriate mental development milestones.
- [00:09:59] Health education and anticipatory guidance, this is general guidance given in anticipation of emerging issues that a child or family may face. For example, you might want to encourage seatbelt use, wearing helmets while riding a bike, and limiting screen time on phones, computers, and games. Alcohol and drug use assessment, this should be addressed even at a young age. According to Bright Futures, children begin receiving assessment for using alcohol and drugs at 11 years old, due to a higher prevalence of early use of drugs and alcohol which can

lead to dependence. If the member has a positive assessment, ensure that appropriate follow-up action is taken.

- [00:10:43] Height and weight is more than just recording these numbers. We also want to encourage nutrition and physical activity counseling which is important for all ages. And finally, the BMI percentile. Because BMI norms for youth vary with age and gender, this measure should evaluate whether the BMI percentile is assessed rather than the absolute BMI value.
- [00:11:08] Healthcare must be made available to treat, correct, or mediate defects for physical and mental illnesses, or conditions discovered by the screening services. However, conditions need not be newly discovered during the screening. Make sure all conditions are addressed fully. Aetna must provide all optional Medicaid services for children, even if the state does not cover these services for an adult. An example of this type of treatment might be a cleft palate corrective surgery.
- [00:11:40] Prior authorization is not required for any EPSDT screening service. The exception is for services and treatments that are not part of the standard of care, such as orthodontic braces. Reach out to your provider relations representative for any questions regarding prior authorization.
- [00:12:00] This slide contains the contact information for Aetna's EPSDT coordinator, HEDIS manager, and QM director. These additional resources are available to you at any time, and we want to encourage your practice to reach out so that we can collaborate with you on ways to ensure your patients are receiving the appropriate EPSDT services.
- [00:12:25] In closing, I want to thank you for your time and attention. At Aetna, we care about the viability of our education and how this is making a difference in the care our members receive. We would appreciate your feedback on this webinar, and ask that you please take the short survey which can be found in the link below this presentation. Thank you and have a great day.
- [00:12:47] [End of tape]