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- All guest phones have been muted: Background noises, conversations, white noise etc., can be disruptive to a webinar.
- Questions: Please use the Chat feature when asking questions and communicating with the host.
- Any questions we are unable to address today, will be answered at a later time.

EPSDT Facts and Guidelines

What you need to know about EPSDT

Webinar Host:

Shatara Bowman, Manager, Healthy Kids
Health Partners Plans

Agenda

- Brief overview of Early and Periodic Screening, Diagnostic and Treatment (EPSDT)
- When to complete various EPSDT screenings
- How to bill/code for EPSDT screenings
- What a well child visit entails according to the EPSDT Periodicity Schedule
- How to collaborate with HPP to assist with missed well child visits

EPSDT Overview

- The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid.
- EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services.
 - ❑ Children Health Insurance Program (CHIP) adheres to the Bright Future guidelines which can be located here:
<https://brightfutures.aap.org/about/Pages/About.aspx>
 - ❑ Medicaid and CHIP share similar guidelines for ensuring that members receive well child visits.***

EPSDT Overview

- E**arly: Assessing and identifying problems early
- P**eriodic: Checking children's health at periodic, age-appropriate intervals
- S**creening: Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
- D**iagnostics: Performing diagnostic tests to follow up when a risk is identified
- T**reatment: Control, correct or reduce health problems found

EPSDT Overview

☐ Screening Services

- Comprehensive health and developmental history
- Comprehensive unclothed physical exam
- Appropriate immunizations (according to the Advisory Committee on Immunization Practices)
- Laboratory tests (including lead toxicity screening)
- Health Education (anticipatory guidance including child development, healthy lifestyles, and accident and disease prevention)

EPSDT Overview

Vision Services

- At a minimum, diagnosis and treatment for defects in vision, including eyeglasses. Vision services must be provided according to a distinct periodicity schedule developed by the state and at other intervals as medically necessary.

Dental Services

- At a minimum, dental services include relief of pain and infections, restoration of teeth, and maintenance of dental health. Dental services may not be limited to emergency services. Each state is required to develop a dental periodicity schedule in consultation with recognized dental organizations involved in child health.

Hearing Services

- At a minimum, hearing services include diagnosis and treatment for defects in hearing, including hearing aids.

EPSDT Overview

❑ Diagnostic Services

- When a screening examination indicates the need for further evaluation of an individual's health, diagnostic services must be provided. Necessary referrals should be made without delay and there should be follow-up to ensure the enrollee receives a complete diagnostic evaluation. States should develop quality assurance procedures to assure that comprehensive care is provided.

❑ Treatment

- Necessary health care services must be made available for treatment of all physical and mental illnesses or conditions discovered by any screening and diagnostic procedures.

EPSDT Periodicity Schedule

- ❑ The EPSDT Periodicity Schedule can be located on our provider site:

www.healthpartnersplans.com/providers/clinical-info/epsdtlead-screening

- ❑ This link has important information related to preventive screenings such as lead, developmental, hearing and vision.

Lead Screenings

- ❑ Lead Screenings — for Medicaid and CHIP kids
- ❑ Lead exposure, especially among young children, continues to be a significant part of the national discussion regarding health issues.
- ❑ According to the Centers for Disease Control (CDC), even low levels of lead in blood have been shown to affect a child's IQ, their ability to pay attention, and academic achievement.
- ❑ As recently as 2012, children with a blood lead level of 10 micrograms per deciliter of blood ($\mu\text{g}/\text{dL}$) or greater were considered to be a concern. However, the CDC's current guidelines now reference a blood level of only 5 micrograms per deciliter to identify children with elevated blood levels¹.

Lead Screenings (continued)

- Lead testing is especially vital in Philadelphia County, which is designated as a “high blood lead area.” For patients in Philadelphia County with an abnormal blood lead level, refer them for an Environmental Lead Investigation (ELI) by completing and faxing a form to the City of Philadelphia at **215-685-2978**.
- For patients in Bucks or Delaware County refer to Accredited Environmental Technology at **610-891-0114**.
- For patients in Chester County, refer to the Chester County Health Department at **610-344-6725** and
- For patients in Montgomery County, refer to the Montgomery County Health Department **610-970-5040**.

Environmental Lead Investigation (ELI)

- An ELI form is required for Health Partners (Medicaid) members under the age of 21 with a blood lead screening result of at least 5 $\mu\text{g}/\text{dL}$, and where there are environmental influences for lead contamination. The order for an ELI must include a primary diagnosis code of toxic effect of lead and its components. It is free for Health Partners (Medicaid) members.
- The ELI form for Philadelphia County can be located at <https://www.healthpartnersplans.com/providers/clinical-info/epsdtlead-screening>
- If outside of Philadelphia please defer to the referring agency for that county.

Lead Testing

- ❑ All Health Partners (Medicaid) and KidzPartners (CHIP) members are required to have a lead test completed before 12 months and at 24 months. In the event that testing is not completed during these timeframes, we urge your office to perform testing at the next Well Child Visit.
- ❑ Testing can be conducted in either your office or at a Quest Diagnostics Drawing Station. When you conduct an 'In-Office Lab Draw' lead screening test, please note that you should submit CPT code 83655. If the testing occurs at a Quest Diagnostics Drawing Station, be sure to provide a prescription to the parent/guardian to enable them to visit any Quest Diagnostics location. Find the closest testing facility by visiting the [Find a Doctor tool](#) and search for "Quest Diagnostics."

Lead Testing (continued)

- Your office can order Filter Paper supply kits by completing a [Quest Diagnostics order form](#).
- Additionally, you can order supplies by visiting [Quest's Care360 website](#). (Please note that a user ID and password will be required. [New users can create an account](#).)

Developmental Screening

- ❑ The Department of Human Services (DHS) requires all Medicaid providers to screen for developmental delays and Autism Spectrum Disorders (ASDs). These requirements have also been integrated into Pennsylvania's EPSDT program. Developmental screenings should be done at 9-11 months, 18 months and 30 months.
- ❑ **Developmental Screenings should be completed for all patients with a confirmed elevated blood lead level—even if a screen was completed during a previous well child visit.**

Developmental Screening (continued)

- ❑ Our providers must document all surveillance, screening and referral activities, and include a copy of the validated developmental or autism screening tool used to conduct the screening. You may use any validated screening tool.
 - [Health Partners Provider Notice \(3/10\)](#)
 - [MA Bulletin 99-09-07 \(Structured Screening\)](#)
 - [Validated Screening Tools](#)

HPP/Provider Collaboration

At Health Partners Plans, our Clinical Programs are staffed by care coordinators — nurses, social workers, health advisors and outreach coordinators who are ready to assess and follow up on your patient’s healthcare needs. Each program is based on collaboration with you, as our member’s healthcare provider, to promote self-management.

Our Clinical Programs have the following departments:

- ❑ **Baby Partners:** The maternity program that follows mothers to be from the first notification of pregnancy through 60 days post-delivery. The Baby Partners Program staff assists members throughout their pregnancy and postpartum period to ensure follow up for appointments and transition to life after delivery for both mother and baby. A plan of care is created for each member to assist the member to alleviate barriers to care and move towards self-management in collaboration with their provider. Our staff assists members with delivery preparation, as well as life with a newborn.

HPP/Provider Collaboration (cont.)

- ❑ **Healthy Kids:** The program for children under the age of 21 where assistance is offered to parents and guardians to promote all the important health care milestones from birth through the age of 21. The staff of the Healthy Kids Unit assists parents and guardians in accessing healthcare for all lines of business. The program addresses access to care issues and appropriate screenings.
- ❑ **Care Coordination:** Care Coordination services are available for Medicaid members who may require assistance with accessing care, coordinating care, identifying resources, and educational guidance and support for their illnesses. The Care Coordinator evaluates the member's healthcare needs through assessment to identify barriers to care. Once these barriers are identified, the Care Coordinator will develop an action plan in collaboration with the member and at times the provider, to eliminate these barriers in order to improve their health outcomes.

HPP/Provider Collaboration (cont.)

- ❑ **Special Needs Unit (SNU):** The Special Needs Unit provides care management services for members who may require assistance getting needed care for their illnesses, disabilities, or other special needs. The unit works with members and their care givers, focusing on both long and short-term goals to achieve and maintain maximum benefits from their medical treatment plan. This unit provides interventions for adult members based on assessment findings and the member's specific care goals. The unit serves as a link between members, practitioners, agencies, community services and other health partners departments.
- ❑ **Clinical Connections Unit:** Responsible for discharge screenings with escalation points to care coordinators to ensure a safe transition home by scheduling follow up appointments. Provides disease specific education and health risk assessment (HRA) follow up with escalation points to the appropriate care coordination units for additional case and disease management needs.

Healthy Kids (HK)Team

- ❑ The Healthy Kids (HK) Department goal is to ensure that healthy kid's transition to healthy adults by utilizing the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) periodicity schedule to provide collaborative and compassionate care to our members. By utilizing the EPSDT guidelines it allows children and adolescents 0-21 to receive appropriate preventive, dental, mental health, developmental and specialty services.
- ❑ Several initiatives are put in place to support and encourage members to go to their PCP such as automated calls for members overdue for lead screenings, yearly EPSDT visits, dental visits, as well as targeted outreach by case managers and outreach coordinators to members. Currently monthly postcards are mailed to members as reminders that they are due for their routine appointments. This strategy to improve well child visits will be changed in 2019.

Healthy Kids (HK)Team (cont.)

- The HK staff will partner with our internal clinical programs (Baby Partners (BP), Care Coordination, and Special Needs Unit(SNU) and external entities to ensure that the well-being of our members is met. These partnerships can include members Primary Care Physician (PCP), educational programs and community resources such as Women, Infant and Children (WIC), Head start and the Young Men's Christian Association (YMCA).
- To receive assistance from the Healthy Kids team please contact us at **215-967-4690**
Select Option 2 then option 9 for Healthy Kids

Quality Care Plus

- As part of our primary care incentive program—Quality Care Plus (QCP)—family practice, internal medicine and pediatric providers are incentivized for the completion of some components of EPSDT.
- Those include:
 - Adolescent Well Visits
 - Annual Dental Visits
 - Childhood Immunization Status
 - Lead Screening in Children
 - Well Child Visits, Ages 3-6 years
 - Well Child Visits, First 15 Months of Life

Healthy First Birthday Smile Program (Care Coordination Incentive)

- As part of our Health First Birthday Smile Program, providers that are certified for topical fluoride varnish (TFV) can earn up to \$5 in an incentive bonus, per member, when they complete all of the following:
 - Apply TFV for a patient's first tooth eruption (around age 6 months)
 - Use medical claim 99188
 - Refer members (YD code on EPDST) to a dental home for a preventive dental visit
 - Ensure the member completes the dental visit by their first birthday

Healthy First Birthday Smile Program (Care Coordination Incentive)

- If the member does not complete the dental visit by their first birthday, you're still eligible for a \$2.50 incentive bonus per member.
- The incentive will be paid out semi-annually.
- For reference, see the YD code below; block 10d on the CMS-1500 billing form below.

<input type="checkbox"/> YES <input type="checkbox"/> NO b. AUTO ACCIDENT?		PL. ACE (State) <input type="checkbox"/> YES <input type="checkbox"/> NO	b. OTHER CLAIM ID (Designat c. INSURANCE PLAN NAME O
<input type="checkbox"/> YES <input type="checkbox"/> NO c. OTHER ACCIDENT?		d. IS THERE ANOTHER HEAL <input type="checkbox"/> YES <input type="checkbox"/> NO	
PROGRAM NAME		10d. CLAIM CODES (Designated by NUCC) YD	
ACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM. PERSON'S SIGNATURE I authorize the release of any medical or other information necessary for payment of government benefits either to myself or to the party who accepts assignment		13. INSURED'S OR AUTHORIZ payment of medical benefits services described below.	
DATE		SIGNED	
INJURY, or PREGNANCY (LMP)	15. OTHER DATE MM DD YY	16. DATES PATIENT UNABLE MM DD	

Coding and Reimbursement for Fluoride Varnish Application

- **Both MCOs and commercial insurance providers are currently reimbursing for fluoride varnish application.** The reimbursement rate for HPP is \$20 per fluoride varnish application.
- **CPT Code 99188** - Application of topical fluoride varnish by a physician or other qualified health care professional (code used by both commercial insurance and Medicaid as of Sept 1, 2015)
- **ICD-10 Code Z29.3** – Encounter for prophylactic fluoride administration (ICD-10-CM Z29.3 is a new 2017 ICD-10-CM code that became effective on October 1, 2016.)
 - *HTHC provides ongoing technical support for trained practices and can help troubleshoot any billing issues you may encounter.*

Healthy Teeth Healthy Children

A Pennsylvania Medical/Dental Partnership

A Program of the PA Chapter, American Academy of Pediatrics

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Polling Question



Please participate

QUESTIONS?

Thank you for your participation!