

### **3.14 Early and Periodic Screening, Diagnosis and Treatment Services** **Effective 7/1/96**

#### **PURPOSE**

The Department of Human Services is responsible for assuring that children in its care and custody receive needed health care services; these include both preventive care and diagnosis and treatment of identified problems. To facilitate this, all children in the Department's care and custody will participate in the EPSDT Program, whether or not they are Medicaid recipients. Young adults, ages 18 to 21, in the extended care program (V9) of the Department, may decide whether to continue participation in the EPSDT Program.

#### **LEGAL BASE AND BACKGROUND**

Federal law mandates that all state Title XIX (Medicaid) include Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT) services for recipients under age 21. The goals of EPSDT are to promote healthy development, to prevent illness, to assist in the early detection of health problems, and to assure that child receives the diagnostic and treatment services which screening has identified as being needed by the child.

Federal regulations (42 CFR 441.56) require that services include:

1. Informing families of the availability of EPSDT services.
2. Notification of periodic screening
3. Ensuring initial and periodic EPSDT services (ex., screening, diagnosis and treatment)
4. Support services
5. Referrals

State policy and procedures for all reimbursable EPSDT services are described in the Maine Medical Assistance Manual.

#### **PROCEDURES**

Participation of children in the care and custody of the Department of Human Services in the EPSDT Program involves three parties:

1. ***The EPSDT Agency*** - an organization with a written contract with the Department of Human Services to carry out EPSDT services as specified in the Medical Assistance Manual. This agency provides families with information about the Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program and facilitates their obtaining EPSDT services in a timely manner. See Appendix A.
2. ***The Child's Caseworker*** - the Department of Human Services' employee delegated to discharge the Department's responsibilities for a child in its care and custody. In most cases, this employee is the Children's Services caseworker. In some regions a Child Protective Services caseworker may be assigned these tasks/responsibilities. For children

preparing for or placed in an adoptive home, an Adoption caseworker usually has this responsibility.

3. **The Family Unit** - the entity referred to in the EPSDT regulations as *the AFDC Foster Care "Family."* For children in the Department's care and custody it refers to the adult caretaker where the child lives. It may be an individual, such as the foster parent, a relative, or the child's birth parent, or a group home, residential treatment center or intermediate care facility. For adolescents whose living arrangements change frequently and are of short duration, the child's caseworker will usually act as the Family Unit in relation to the EPSDT agency.

The responsibilities for each party are listed below. All are carried out in accordance with BMS, EPSDT Agency Services policy, the Bureau of Child and Family Services policy, and other applicable Department and state policies.

**A. PREPARATION**

EPSDT	CHILD'S CASEWORKER	FAMILY UNIT
	1. Obtains family and child health history and records in child's case record.	
	2. Provides the family unit with basic health information at time of placement. Provides the family unit with a comprehensive health history on the child within 6 weeks of placement in order to assure routine health care.	2. Receives the child's basic health information from caseworker at time of placement and a comprehensive health history within 6 weeks.
	3. Completes Substitute Care Social Services Face Sheet (BSSIS-051), including telephone and name of caretaker in care of whom mail is to be sent. The address of the Regional Office is usually given if the child's whereabouts are unknown, or in other	

individually determined case situations.

EPSDT

CHILD'S CASEWORKER FAMILY UNIT

1. Receives computer generated report of the names of EPSDT eligible children, checks files, and identifies those who:

- a. Are currently on Medicaid.
- b. Were previously on Medicaid and are now re-eligible for EPSDT services.
- c. Are on Medicaid for the first time.

2. If necessary, obtain child's whereabouts by contacting:

- a. The child's caseworker when the address is Regional Office, unknown, unclear, or appears to be temporary (i.e., hospital, camp).
- b. Designated staff at group home.
- c. Substitute Care Program Specialist, Augusta, if address reads "State House."
- d. An emergency shelter to determine which

regional office placed the child and then the child's caseworker in that office.

**B. INFORMING**

EPSDT	CHILD'S CASEWORKER	FAMILY UNIT
1. Sends written information on EPSDT/Medicaid services to new "family units" and reviews services available as requested or needed.	1. Reads information on EPSDT purpose and services.	1. Reads description of EPSDT purpose and services.
2. Exchanges information on child with caseworker and Family Unit.	2. Exchanges information, upon request, about health history with EPSDT agency.	2. Exchanges information on the child in their home with the EPSDT agency and the caseworker.
<ul style="list-style-type: none"> <li>a. Health history</li> <li>b. Health services already obtained and needed -medical, dental, immunizations.</li> </ul>		
3. Plans for initial EPSDT services.	3. Plans for initial EPSDT services for children for whom the child's caseworker acts as the Family Unit.	3. Participates in planning for EPSDT services.

**C. ROUTINE MEDICAL AND DENTAL CARE (SCREENING)**

EPSDT	CHILD'S CASEWORKER	FAMILY UNIT
	1. Discusses with Family Unit preferences regarding	1. Discusses with child's caseworker preference for

<p>1. Assists Family Unit and child’s caseworker to identify health resources/providers and schedule appointments within scope of EPSDT program.</p>	<p>routine medical and dental care.</p> <p>2. Determines from whom child will receive routine medical and dental care. Continuity of care is a major consideration on the selection of providers. Children in voluntary care (V2) and others with return home as the objective within 6 months should preferably have health care providers who were involved with the prior to coming into care and who would be involved after return home, if such provision is appropriate and feasible.</p>	<p>routine medical and dental care of child.</p> <p>2. Schedules routine medical and dental care with providers selected by the caseworker.</p>
--	--	---

**D. DIAGNOSTIC EVALUATION AND TREATMENT**

EPSDT	CHILD’S CASEWORKER	FAMILY UNIT
<p>1. Notifies child’s caseworker and Family Unit in writing of any necessary diagnostic evaluation or treatment indicated by EPSDT screening.</p> <p>2. Assists by identifying health providers for the recommended evaluations or treatment.</p>	<p>1. Is notified of any necessary diagnostic evaluation or treatment indicated by EPSDT screening.</p> <p>2. Decides what and where diagnostic evaluation and treatment will be provided the child, following consultation with the child’s primary physician, Family</p>	<p>1. Notifies child’s caseworker if child needs other than routine medical or dental care, diagnostic evaluation, or treatment.</p> <p>2. Participates in caseworker’s decision as to what and where care and treatment will be obtained for the child.</p>

Unit, birth family, agencies, and relevant professionals as appropriate.

**E. PERIODIC SCHEDULE**

EPSDT	CHILD’S CASEWORKER	FAMILY UNIT
1. Notifies the Family Unit according to the periodicity schedule (Appendix B). If the child’s address is the regional office, unclear, unknown, or appears temporary (i.e., hospital, emergency shelter).	1. Receives notification of periodic schedule for children whose address is unknown, unclear, the Regional Office, or appears temporary.	1. Receives notification of periodicity schedule.
2. Plans for EPSDT services related to periodicity schedule.	2. Plans for services related to periodicity schedule for children for whom the child’s caseworker is acting as Family Unit.	2. Plans for services related to periodicity schedule for child in their home.
3. Assists Family Unit and child’s caseworker to identify health providers and schedule appointments within scope of EPSDT program.	3. Schedules needed examinations or services for these children.	3. Schedules needed examinations or services for child.

**F. RECORDS AND REPORTS**

EPSDT	CHILD’S CASEWORKER	FAMILY UNIT
1. Sends summary of initial and periodic screenings, problems identified and follow-up	1. Maintains records of child’s health care in child’s case record in accordance	1. Maintains for the duration of placement a record of child’s illnesses, of the medical and dental care

activities to child's caseworker.

with BCFS policy on Health Records.

received, and of any additional health information required by licensing statutes and Bureau policy.

2. Takes child's Portable Health Record when child is moved and gives it to the subsequent caretaker in accordance with policy on Health Records.

2. Updates child's caseworker about child's health and care received when the child's case plan is reassessed and at other times when requested by the child's caseworker.

3. The child's Portable Health Record maintained by the Family Unit will be taken with the child when he moves.

**G. TRANSPORTATION**

EPSDT

CHILD'S CASEWORKER

FAMILY UNIT

1. Assists child's caseworker to arrange transportation for appointments for medical or dental services covered by Medicaid, at request of caseworker, if:

a. Family Unit or child's caseworker is unable to

1. Arranges for or provides transportation for child to medical and dental appointments when notified by the Family Unit if they are unable to provide or arrange for this.

2. Contacts EPSDT agency for assistance:

- a. If transportation cannot be provided or arranged by the child's caseworker, or
- b. Special arrangements are needed, e.g., out-of-state, air transportation.

1. Transports child to his medical and dental appointments or arranges for such transportation. Transportation will be reimbursed in accordance with BCFS and BMS policies.

2. Consults with child's caseworker for alternatives before canceling appointments.

provide or arrange for such transportation. These arrangements are generally be through community based transportation agencies with contracts to provide transportation for medical or dental services which are covered by Medicaid.  
b. Special arrangements are needed.

**APPENDIX A  
EPSDT SERVICES**

**AGENCIES RESPONSIBLE FOR EPSDT SERVICES BY COUNTY OF RESIDENCE**

IF THE CHILD LIVES IN:	THE EPSDT AGENCY IS:
Androscoggin	The child's HMO*
Aroostook	Foundation Health Federal Services, Inc. PO Box 17515 Portland, Maine 04112-9862 1-800-977-6740 (207) 842-2600
Cumberland	The child's HMO*
Franklin	Foundation Health Federal Services, Inc. PO Box 17515 Portland, Maine 04112-9862 1-800-977-6740 (207) 842-2600
Hancock	Foundation Health Federal Services, Inc. PO Box 17515



Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Kennebec

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Knox

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Lincoln

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Oxford

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Penobscot

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Piscataquis

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740

(207) 842-2600

Sagadahoc

The child's HMO\*

Somerset

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Waldo

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

Washington

Foundation Health Federal Services, Inc.  
PO Box 17515  
Portland, Maine 04112-9862  
1-800-977-6740  
(207) 842-2600

York

The child's HMO\*

\*This is effective 11/1/96 for Title IV-E recipient children and children whose Medicaid eligibility is based on AFDC income and asset criteria (T, J, TV, JV). Until 11/1/96 Foundation Health Federal Services, Inc. will be responsible for EPSDT services for these Medicaid recipient children.

After 11/1/96 Foundation Health Federal Services, Inc. will continue to be responsible for EPSDT services for children in this county whose Medicaid eligibility is not based on Title IV-E or AFDC criteria. (Example: SSI recipients.)