



<b>Policy Title: Early and Periodic Screening, Diagnosis, and Treatment</b>		<b>POLICY #: 10.2.4</b>	
		<b>Line of business: Medi-Cal</b>	
<b>Department Name:</b> Utilization Management	<b>Original Date</b> 11/97	<b>Effective Date</b> 12/18	<b>Revision Date</b> 12/18, 2/20, 8/20, 11/19/20
<b>Department Head: Mirela Albertsen, UM Senior Director</b> 			<b>Date: 3/21</b>
<b>Medical Services/P&amp;T Committee: (If Applicable) PHP CMO</b> 			<b>Date: 3/21</b>

**PURPOSE**

To define the role of Blue Shield of California Promise Health Plan ("Blue Shield Promise") in assuring the delivery of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services for members under 21 years of age.

**DEFINITIONS**

**POLICY**

1. Definitions:
  - a. "Case Management Services" means those services furnished to assist individuals eligible under the Medi-Cal State plan who reside in a community setting or are transitioning to a community setting, in gaining access to needed medical, social, education, and other services in accordance with 42 Code of Federal Regulations (CFR) sections 441.18 and 440.169. The assistance that case managers provide in assisting eligible individuals is set forth in 42 CFR 14 section 440.169(d) and (e), and 22 California Code of Regulations (CCR) section 51184(d), (g) (5) and (h). SA Pg. 3, para. 1.
  - b. "EPSDT Services" means Early and Periodic Screening, Diagnostic and Treatment services, a benefit of the State's Medi-Cal program that provides comprehensive, preventative, diagnostic, and treatment services to eligible children under the age of 21, as specified in section 1905(r) of the Social Security Act. (42 U.S.C. §§ 1396a(a)(10)(A), 1396a(a)(43), 1396d(a)(4)(B), 1396d(r).) EPSDT Services are key to ensuring members who are eligible receive appropriate preventive, dental, mental health, developmental, and specialty services
  - c. "Home Health Agency" or "HHA" as defined in Health and Safety Code section 1727(a) and used herein, means a public or private organization licensed by the State which provides skilled nursing services as defined in Health and Safety Code section 1727(b), to persons in their place of residence.

- d. "Individual Nurse Provider" or "INP" means a Medi-Cal enrolled Licensed Vocational Nurse or Registered Nurse who independently provides Private Duty Nursing services in the home to Medi-Cal beneficiaries.
  - e. "Private Duty Nursing" or "PDN" means nursing services provided in a Medi-Cal beneficiary's home by a registered nurse or a licensed practical nurse, under the direction of a beneficiary's physician, to a Medi-Cal beneficiary who requires more individual and continuous care than is available from a visiting nurse. (42 CFR. § 440.80.)
2. Blue Shield Promise shall provide or arrange and pay for EPSDT supplemental services, including case management services and targeted case management to assist members in gaining access to necessary medical, social, educational, and other services as defined in Title 22, CCR, Section 51184, as well as, Private Duty Nurses (PDN) as outlined in APL 20-012.
  3. EPSDT services to be provided at intervals which meet reasonable standards of medical and dental practice and at other intervals indicated as medically necessary to determine the existence of physical or mental illnesses or conditions include the following:
    - a. **Screening services**
      - i. At minimum include:
        1. Comprehensive health and developmental history
        2. Comprehensive unclothed physical exam
        3. Appropriate immunizations
        4. Laboratory tests
        5. Health education (including anticipatory guidance – such as tobacco cessation and prevention)
        6. Blood Lead Screening (in accordance with APL 18-017)
    - b. **Vision services**
      - i. At minimum include:
        1. Diagnosis and treatment for defects in vision
          - a. Including eyeglasses
    - c. **Dental Services**
      - i. At minimum include:
        1. Treatment for relief of pain and infections
        2. Restoration of teeth
        3. Maintenance of dental health
    - d. **Hearing Services**
      - i. At minimum include:
        1. Diagnosis and treatment of defects in hearing
          - a. Including hearing aids
    - e. **Private Duty Nursing Case Management**
      - i. Blue Shield Promise is required to provide Case Management Services as set forth in its Medi-Cal contract to all plan enrolled Medi-Cal beneficiaries who are EPSDT eligible and for whom Medi-Cal Private Duty Nursing services have been approved, including, upon a plan member's request, Case Management Services to arrange for all approved Private Duty Nursing services desired by the plan member, even when Blue Shield Promise is not financially responsible for paying for the approved Private Duty Nursing services. SA Pg. 6, para. 21.a.i. Medi-Cal Private Duty

Nursing services include Private Duty Nursing services approved by the California Children's Services Program (CCS).

- ii. Blue Shield Promise shall use one or more Home Health Agencies, Individual Nurse Providers, or any combination thereof, in providing Case Management Services as set forth in the Medi-Cal contract to plan enrolled EPSDT eligible Medi-Cal beneficiaries approved to receive Private Duty Nursing services, including, upon that member's request, Case Management Services to arrange for all approved Private Duty Nursing services desired by the member, even when Blue Shield Promise is not financially responsible for paying for the approved Private Duty Nursing services. SA Pg. 6, para. 21.a.ii.
- iii. Blue Shield Promise's obligations to plan enrolled EPSDT eligible Medi-Cal beneficiaries approved to receive Private Duty Nursing services who request Case Management Services for their approved Private Duty Nursing services include, but are not limited to:
  - 1. Providing the member information about the number of PDN hours they are approved to receive;
  - 2. Contacting enrolled Home Health Agencies (HHAs) and enrolled individual nurse providers to seek approved PDN services on the member's behalf;
  - 3. Identifying and assisting potentially eligible HHAs and individual nurse providers and assisting them with navigating the process of enrolling to be a Medi-Cal provider;
  - 4. Working with HHAs and enrolled individual nurse providers to jointly provide PDN services to the member as needed.
- iv. When a Medi-Cal Managed Care Plan has approved a plan enrolled EPSDT eligible Medi-Cal beneficiary to receive Private Duty Nursing services, the Managed Care Plan has primary responsibility to provide Case Management for approved Private Duty Nursing services. SA Pg. 11, para. 24.a.
- v. When CCS has approved a CCS participant who is an EPSDT eligible Medi-Cal beneficiary to receive Private Duty Nursing services for treatment of a CCS condition, the CCS Program has primary responsibility to provide Case Management for approved Private Duty Nursing services. SA Pg. 11, para. 24.b.
- vi. Regardless of which Medi-Cal program entity has primary responsibility for providing Case Management for the approved Private Duty Nursing services, an EPSDT eligible Medi-Cal beneficiary approved to receive Medi-Cal Private Duty Nursing services, and/or their personal representative, may contact any Medi-Cal program entity that the beneficiary is enrolled in (which may be a Managed Care Plan, CCS, or the Home and Community Based Alternatives Waiver Agency) to request Case management for Private Duty Nursing services. The contacted Medi-Cal program entity must then provide Case Management Services as described herein to the beneficiary and work collaboratively with the Medi-Cal program entity primarily responsible for Case Management. SA Pg. 12, para. 25

- vii. Members may choose not to use all approved PDN service hours, and Blue Shield Promise is permitted to respect the member's choice. Blue Shield Promise must document when a member chooses not to use approved PDN services and/or all efforts to locate and collaborate with providers of PDN services including other entities such as California Children's Services (CCS).
  - f. **Other necessary health care, diagnostic services, treatment, and measures**, as described in 42 USC 1396d(a), to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not such services or items are listed in the state plan or are covered adults
- 4. Where diagnostic, treatment or other EPSDT services are provided in a home or community based setting, the total costs incurred for the services must be less than what the total costs would be for the provision of "medically equivalent services" in an appropriate institutional level of care.
- 5. All members under the age of 21 must receive EPSDT screenings designed to identify health and developmental issues, as early as possible.
  - a. Benefit includes diagnostic and treatment services for members with developmental issues, when a screening examination indicated the need for further evaluation of child's health.
  - b. Blue Shield Promise is responsible for providing medically necessary Behavioral Health Treatment (BHT) services for members that meet eligibility criteria defined in SSA, Section 1905(a) and outlined in APL 18-006.
  - c. Blue Shield Promise is responsible for providing case management as necessary, including, at the member's request, arranging for all approved Private Duty Nurse (PDN) services for CCS members as outlined in APL 20-012 and this document.
- 6. Exceptions:
  - a. Dental services provided by dental personnel covered by the Medi-Cal Denti-Cal program (Policy Letter 13-002);
  - b. Non-medical services provided by Regional Centers to individuals with developmental disabilities, including but not limited to, respite, out-of-home placement, and supportive living. However, Blue Shield Promise will monitor and coordinate all medical services with Regional Center staff;
  - c. Alcohol and substance use disorder treatment services available under the Drug Medi-Cal Program and outpatient heroin detoxification services, including all medications used for treatment of alcohol and substance use disorder covered by DHCS, but reimbursed through Medi-Cal fee-for-service (FFS);
  - d. Specialty mental health services listed in Title 9, CCR, Section 1810.247 for beneficiaries that meet medical necessity criteria as specified in Title 9, CCR, Sections 1820.205, 1830.25, or 1830.210, which must be provided by a mental health plan (APLs 13-018 and 17-018);

- e. Services determined to be medically necessary for treatment or amelioration of the CCS covered condition must be case managed and have obtained prior authorization by the CCS program (on a FFS basis) (Title 22, CCR, Section 51013);
- f. Services for which prior authorization is required but are provided without obtaining prior authorization; and
- g. Other services listed as services that are not “Covered Services” under Blue Shield Promise contract with DHCS, such as Pediatric Day Health services.

## **PROCEDURE**

Blue Shield Promise must assess what level of medically necessary services the individual requires, determine what level of service (if any) is being provided by other entities, and then coordinate the provision of services with the other entities to ensure that there are no duplication of services. (Other entities may include – Local Education Agency, Regional Center, or local governmental health programs that have overlapping responsibility for providing services to an individual under the age of 21)

1. The EPSDT Services must meet all of the following criteria:
  - a. Be necessary to correct or ameliorate defects and physical and mental illnesses and conditions discovered through screening services.
  - b. Supplies, items, or equipment to be provided are medical in nature.
  - c. Not requested solely for the convenience of the beneficiary, family, physician or provider of the service.
  - d. Not be unsafe to the individual EPSDT eligible beneficiary or be experimental
  - e. Not be primarily cosmetic in nature nor for the primary purpose of improving the beneficiary’s appearance.
  - f. Be the most cost effective where alternative medically accepted modes of treatment are available.
  - g. Are generally accepted by the professional medical and dental community as effective and proven treatments for the conditions for which they are proposed to be used.
  - h. Are within the authorized scope of practice of the provider, and are an appropriate mode of treatment for the health condition of the beneficiary
  - i. The predicted beneficial outcome of the services outweighs the potential harmful effects.
2. Blue Shield Promise is not responsible for authoring or payment of EPSDT services that are:
  - a. Provided by California Children’s Services (CCS) for CCS eligible condition
  - b. Provided by a Mental Health Provider for a mental health condition
  - c. Provided by a Targeted Case Management Program
3. EPSDT services are subject to prior authorization (see UM P&P #70.2.50 Prior Authorization Review and Approval Process).
4. Blue Shield Promise Members who require ongoing coordination of care while receiving EPSDT services may be referred to case management by providers, members or family members. Blue Shield Promise case managers will coordinate

services between the PCP and the EPSDT provider to ensure the member receives all medically necessary covered services that are not a part of the EPSDT services.

5. Any medically appropriate diagnostic, treatment, and follow-up services identified during the IHA or other health care visits shall be initiated as soon as possible, but no later than 60 calendar days following either a preventive screening or other visit that identifies a need for follow-up
6. Necessary transportation services, including medical and non-medical transportation subject to Blue Shield Promise established policies and procedures for obtaining such services.
  - a. Refer to APL 17-010, UM P&P 10.2.44 and Member Services P&P 10.3.20.
7. EPSDT services notification will be included in the annual member mailing starting 2020.

#### **REFERENCES**

APL 16-014  
APL 17-010  
APL 18-006  
APL 18-007  
APL 18-017  
APL 20-012  
CCR Title 9 Section 1820.205 and 1830.210  
CCR Title 17 Section 6800  
CCR Title 22 Sections 51184, 51340 & 51340.1  
CFR Title 42 Section 440.130  
SSA Section 1905  
USC Title 42 Section 1396d (a) and (r)