



# Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) State Health Official (SHO) Letter Overview

September 26, 2024

# Background on EPSDT

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  - The EPSDT requirement is a cornerstone of Medicaid and CHIP program coverage of child health services.
  - EPSDT is designed to ensure that children and youth can access the health care they need, when they need it, so that health problems are averted or diagnosed and treated as early as possible.
  - Section 1905(a)(4)(B) and 1905(r) of the Social Security Act entitles eligible children under the age of 21 to Medicaid coverage of health care, diagnostic services, treatment, and other measures described in section 1905(a) that are medically necessary to correct or ameliorate defects and physical and mental illnesses and conditions, whether or not such services are covered under the state plan.

# Recent Legislation

Section 11004 of the Bipartisan Safer Communities Act charged CMS with:

- **Identifying gaps** and deficiencies regarding state compliance with EPSDT requirements
- **Providing technical assistance** to states to address such gaps and deficiencies
- **Issuing guidance (EPSDT SHO letter)** on Medicaid coverage requirements, including best practices for ensuring children and youth have access to comprehensive health care services
- **Issuing a Report to Congress** on the activities, findings, and actions taken based on the review findings

# State Health Official Letter Content (1/3)

- The letter provides policy guidance, effective strategies to ensure access, and best practices states can employ for EPSDT-eligible children.
- The letter clarifies policy implementation, including strategies and best practices for delivery of a comprehensive EPSDT program.
- **Key topic: Promoting EPSDT Awareness and Accessibility**
  - Requirements to inform beneficiaries and families about EPSDT
  - Provision of EPSDT support services (transportation, appointment scheduling)
  - Improving health care accessibility using care coordination and case management
  - Requirements to ensure consideration of EPSDT in Medicaid policies and procedures such as prior authorization and fair hearings
  - Meeting requirements related to EPSDT and managed care

# State Health Official Letter Content (2/3)

- **Key Topic: Expanding and Using Children-Focused Workforce**
  - Strategies to broadening provider qualifications
    - States have broad flexibility to establish reasonable provider qualifications related to the fitness of a provider to perform covered medical services, and states can require that MCPs use network providers that meet these standards.
    - States may expand the range of existing providers of Medicaid-covered services by providing training and support to expand the pool of available providers.
    - The SHO identifies best practices for states to support and incentivize general practitioners to serve younger children.
  - Use of telehealth
  - Interprofessional consultations to access specialty providers
  - Use of payment methodologies to incentivize EPSDT provider participation.

# State Health Official Letter Content (3/3)

- **Key Topic: Improving Care for Children with Specialized Needs:**
  - Children with Behavioral Health Conditions: States need to have sufficient options and provider capacity to support children with medically necessary care, including:
    1. Screening and assessment;
    2. Care when children are demonstrating early signs or symptoms of concern
    3. Community-based services at varying levels of intensity necessary to correct or ameliorate a wide range of behavioral health acute and/or chronic conditions, including routine community-based services as well as community-based services to meet more intensive needs
    4. Crisis or urgent care to meet children's acute issues when they arise; and,
    5. Inpatient care, only when children's needs cannot be met with community-based services.
  - Children in Foster Care: Within a few days of placement in foster care, states should ensure that children receive an initial assessment of acute physical and behavioral health needs, followed by a comprehensive visit similar to a well-child visit.
  - Children with Disabilities or Other Complex Health Needs: States must ensure that EPSDT obligations are met, including when offering services under other Medicaid authorities, including home and community-based services (HCBS) programs.