



Refer to: M07

Region V
105 West Adams Street
15th Floor
Chicago, IL 60603-6201

October 1991

Chicago Regional State Letter No: 66-91

Subject: Clarifying Issues Related to Early and Periodic Screening and Diagnosis and Treatment (EPSDT) Services.

The **purpose of** this letter is to clarify to the States two issues related to the delivery of EPSDT **services**.

The first issue has to do with **the content of a screening that would normally be reported on Line 6 of form HCFA-416**. The screening must consist of all of the following elements delineated in Section 5360 C.2 of the State Medicaid Manual:

- A comprehensive **health** and developmental history (including assessment of both physical and mental **health** development);
- A comprehensive unclothed physical exam;
- **Appropriate** immunizations according to **age and** health;
- Laboratory tests (including blood **lead** level **assessment** appropriate for **age and** risk factors); and
- **Health** education (including anticipatory guidance).

This package of five elements constitutes a full screening. Any screening that does not contain **all five of** the elements listed above cannot be considered **a full** periodic screen **and should not** be reported on line 6 of HCFA-416. **Do not report on line 6 any partial or interperiodic screening or anything** related to vision, dental, or hearing screens or **services**.

The second **issue** pertains to the definition of "**one service**" as it is used in the State Medicaid Manual. Section 5123.1 C of the State Medicaid Manual states:

"Providers may not be limited to those which have an exclusive contract to perform all EPSDT services. Services provided may not **be** limited to either the private **or the public** sector or **because** the provider may not offer all EPSDT services or because it offers only one service."

"One service" can be any one of the following:

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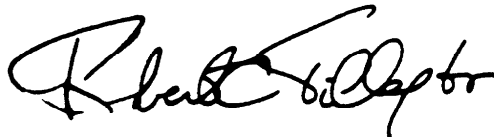
- a. **Screening** services (which consist of each of the **five** elements **listed** here **and** above: history, physical **exam**, immunizations, laboratory tests, health education and anticipatory guidance);
- b. A vision screen;
- c. **A** dental screen; or
- d. A **hearing screen**.

States do have the flexibility **of** limiting screening provider **participation to those** providers that agree to furnish all of the elements found **within a, or b, or c, or d**.

Similarly, States also have the flexibility to **allow** certain elements of the screening package described in "**a**" to **be** rendered by on8 provider, **with the remaining** elements to be **rendered** by another provider. This **flexibility** applies to all of the elements except **the** health education/anticipatory **guidance element**. Guidance from our Central **Office indicates** that **HCFA** would oppose classifying **someone who only** provided health education as a provider. Health education **or anticipatory guidance should be** considered an essential component **of** every health care encounter, but not **a** separable **service**.

In choosing to utilize multiple providers to render one screening package, the State must demonstrate that **the** individual child received all five elements included **in** the screen. **The** State's **MMIS** or other system must aggregate all of the five elements into the full **package before the "screen"** can be counted as complete.

If you have any question **please contact Barbara England, Policy** Specialist, Medicaid Operation Branch, at (312) **353-9860** or your Medicaid Program Specialist.



Charles W. **Hazlett**
Associate Regional Administrator
Division of Medicaid

Originating Component: Medicaid Operations **Branch**
Division of Medicaid