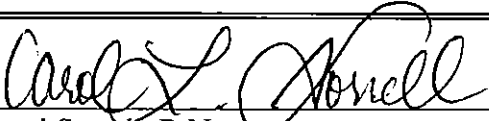
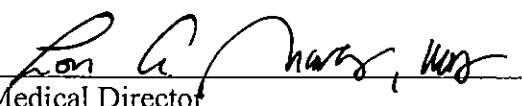
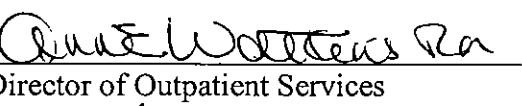
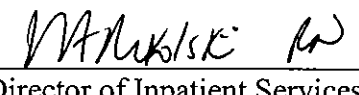


**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: EPSDT Supplemental Services and Targeted Case Management (TCM)		INDEX NUMBER 3.13-P		Page 1 of 5	
SECTION: Utilization Management		ISSUE DATE: January 31, 1996			
Review Date	8/29/97	07/99	07/00	05/01	09/2005
Effective Date					12/20/05
Revision No.	1997-08	1999-07	2000-07	N/A	2005-10

Approved	 Carol Sorrell, R.N. Chief Executive Officer	Date	10/13/05
Approved	 Medical Director	Date	9-19-05
Approved	 Director of Outpatient Services	Date	9-23-05
Approved	 Director of Inpatient Services	Date	9-19-05

POLICY¹:

KHS will ensure the provision and referral of appropriate EPSDT Supplemental Services (ESS) in accordance with the following statutory, regulatory, and contractual requirements:

- Title 22, CCR, Section 51184 and 51340(k)
- DHS Contract Exhibit A – Attachment 10 Provision 4(F) and Attachment 11 Provision 2

Healthy Families members are not eligible for the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program. This policy and procedure applies to Medi-Cal members only.

PURPOSE:

To define systematic methods for the identification and referral of KHS Medi-Cal members who qualify for the EPSDT program.

DEFINITIONS:

EPSDT Case Management Services²	Services that will assist EPSDT-eligible individuals in gaining access to needed medical, social, educational, and other services.
EPSDT Diagnosis and	Only those services provided to persons under 21 years of age that:

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Treatment Services³	<ol style="list-style-type: none"> 1. Are identified in section 1396d(r) of Title 42 of the United States Code, 2. Are available under CCR Title 22 Chapter 3 of Division 3 Subdivision 1, ccr.oal.ca.gov without regard to the age of the recipient or that are provided to persons under 21 years of age pursuant to any provision of federal Medicaid law other than section 1396d(a)(4)(B) and section 1396a(a)(43) of Title 42 of the United States Code, and 3. Meet the standards and requirements of CCR Title 22 Sections 51003 and 51303, ccr.oal.ca.gov and any specific requirements applicable to a particular service that are based on the standards and requirements of those sections.
EPSDT Supplemental Services⁴	<p>Health care, diagnostic services, treatment, and other measures, that:</p> <ol style="list-style-type: none"> 1. Are identified in Section 1396d(r) of Title 42 of the United States Code 2. Are available only to persons under 21 years of age 3. Meet one of the standards of medical necessity as set forth in paragraphs (1), (2), or (3) of CCR Title 22 Section 51340(e) ccr.oal.ca.gov, and 4. Are not EPSDT diagnosis and treatment services. <p>This includes EPSDT case management services when provided by EPSDT case managers.⁵</p> <p>This includes pediatric day health care when provided by a pediatric day health care facility.⁶</p>

PROCEDURE:

1.0 PROGRAM DESCRIPTION

EPSDT and ESS are available to KHS Medi-Cal members under 21 years of age. Federal law requires that states provide medically necessary screening, vision, hearing, and dental services. In addition, federal law mandates that any service a state is permitted to cover under Medicaid law that is medically necessary to correct or ameliorate a defect, physical or mental illness, or other medical condition must be provided to beneficiaries under twenty-one years of age, even if the service is not otherwise included as a Medicaid benefit. The program under which these services are provided is EPSDT.

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Under the EPSDT program, children and young adults under 21 years of age are examined by their PCP to determine the extent of health care needs. If services to meet those needs differ from services available to Medi-Cal beneficiaries 21 years and older, and if the services meet specified requirements of medical necessity, they may be provided through the EPSDT program. These special services are designated EPSDT Supplemental Services (ESS). KHS Medi-Cal members under the age of 21 may receive ESS in addition to regular benefits.

ESS include targeted case management services designed to assist children in gaining access to necessary social, medical, educational, and other services.⁷

2.0 ACCESS

KHS provides or arranges and pays for appropriate ESS, including case management and supplemental nursing services, except when ESS are provided as CCS services or as mental health services.⁸

The need for service will usually be identified by the member's PCP as part of the initial (or subsequent) health assessment. If the member appears to require ESS, the member's PCP should contact the UM Department. Additionally, the member or a parent or guardian or any non-PCP Provider may bring to the Health Plan's attention a member's illness or condition that potentially may require ESS.

When the need for ESS is identified, UM Staff arrange for the member to be referred to an appropriate provider or organization. This takes place whether or not KHS is responsible for payment of the service.

KHS is responsible for determining whether a member requires Targeted Case Management (TCM) services, and refers members who are eligible for TCM services to a Regional Center or local governmental health program as appropriate for the provision of TCM services.⁹ If members under age 21 are not accepted for TCM services, KHS ensures the member has access to services comparable to EPSDT TCM services.¹⁰ Such services would be provided through the County Health System if not otherwise available.

If a Member is receiving TCM services as specified in Title 22, CCR, Section 51351, KHS is responsible for determining the medical necessity of covered diagnostic and treatment services recommended by the TCM provider.¹¹

2.1 Medical Necessity Standards¹²

KHS uses the following standards to determine the Medical Necessity of ESS:¹³

- A. The services meet existing criteria for medical necessity applicable to services available to other Medi-Cal members
- B. The services meet specific requirements for dental, hearing, onsite investigations to

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detect the source of lead contamination, or pediatric day health care services as outlined in CCR Title 22 Section 51340.1

- C. For TCM services¹⁴ or other services when the standards set forth in items A or B are not applicable, all of the following standards must be met:
1. The services are necessary to correct or ameliorate defects or physical and mental illness or conditions discovered by the EPSDT screening services
 2. The supplies, items, or equipment to be provided are medical in nature
 3. The services are not requested solely for the convenience of the member, family, physician or other provider of service
 4. The services are safe and not experimental
 5. The services are not primarily cosmetic in nature nor primarily to improve the member's appearance
 6. Where alternative medically accepted modes of treatment are available, the services are the most cost effective
 7. The services are generally accepted by the professional medical community as effective and proven treatments for the conditions for which they are proposed to be used.
 8. The services are within the authorized scope of practice of the Provider and are an appropriate mode of treatment for the health condition of the member
 9. The predicted beneficial outcome of the services outweighs potential harmful effects
 10. Available scientific evidence demonstrates that the services improve the overall health outcomes as much as, or more than, established alternatives.

3.0 COORDINATION OF CARE

KHS is responsible for coordinating the member's health care with the TCM provider.¹⁵ UM Staff work with the ESS Provider to ensure communication with and reporting back to the member's PCP regarding all services provided and the outcome of such services.

4.0 REIMBURSEMENT

KHS is responsible for payment of ESS except for services provided under CCS or mental health and for Case Management services provided by a State-contracted referral provider such as a Regional Center.

¹ Revision 2005-10: Routine review. Policy reviewed against DHS Contract 03-76165 (Effective 5/1/2004).

² CCR Title 22 Section 51184(g)

³ CCR Title 22 Section 51184(b)

⁴ CCR Title 22 Section 51184(c)

⁵ CCR Title 22 Section 51184(d)

⁶ CCR Title 22 Section 51184(j)

⁷ DHS Contract A-10 4(F).

⁸ DHS Contract A-10 4(F).

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⁹ DHS Contract A-11 2

¹⁰ DHS Contract A-11 2

¹¹ DHS Contract A-11 2

¹² CCR Title 22 Section 51340

¹³ DHS Contract A-10 4(f)

¹⁴ CCR Title 22 Section 51340(k)

¹⁵ DHS Contract A-11 2