

# PROTECTING AND ADVANCING EPSDT IN IL MEDICAID MANAGED CARE



Sargent Shriver National Center on Poverty Law  
EverThrive Illinois

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funding from **Robert Wood Johnson  
Foundation.**

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# E P S D T

## □ SCREENING:

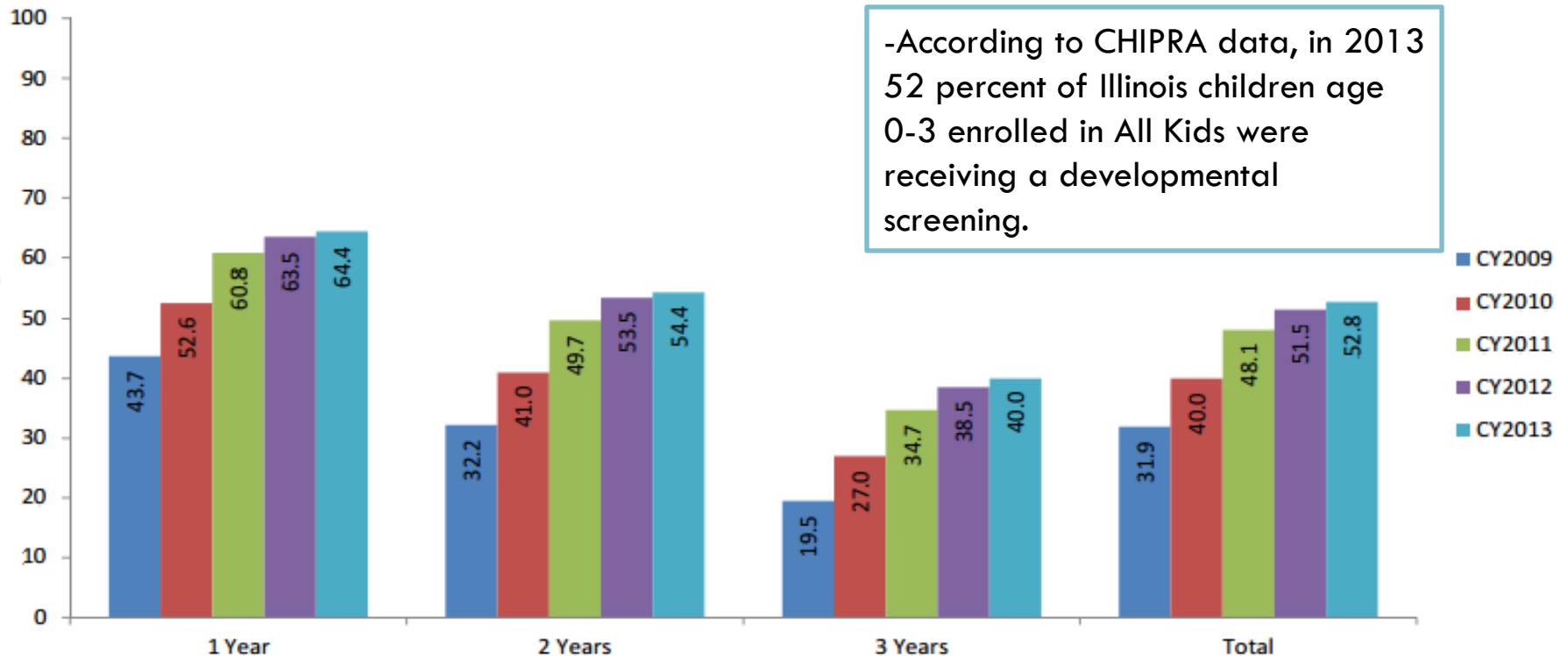
- Comprehensive health and **developmental** history that assesses for both physical and mental health, as well as for substance use disorders;
- Comprehensive, unclothed physical examination;
- Appropriate immunizations, in accordance with the schedule for pediatric vaccines established by the Advisory Committee on Immunization Practices;
- Laboratory testing (including blood lead screening appropriate for age and risk factors); and
- Health education and anticipatory guidance for both the child and caregiver.\*



\*Source: Medicaid.gov "Early and Periodic Screening, Diagnostic, and Treatment"

# Developmental Screenings in the First Three Years of Life (2009-2013)

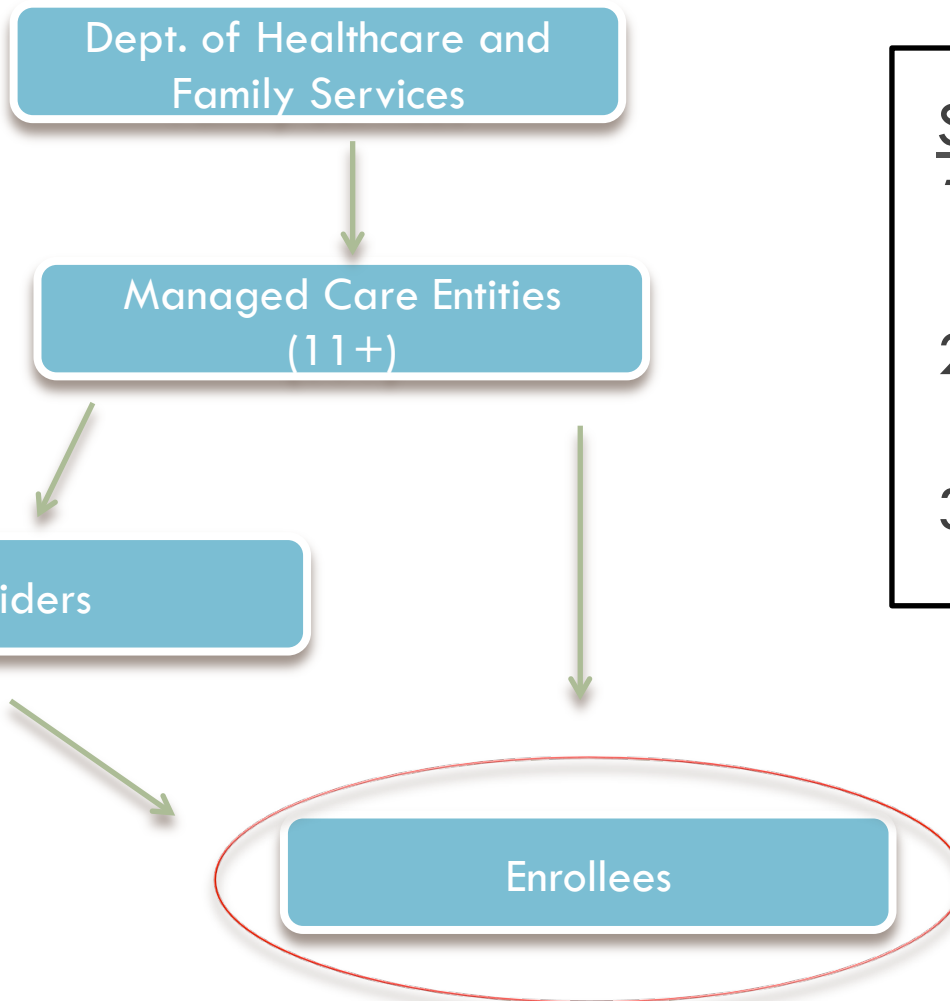
**Developmental Screening in the First Three Years of Life**



Source: CHIPRA Core Set of Children's Health Care Quality Measures for Medicaid and CHIP: Illinois' Performance Calendar Year 2009 through 2013

<https://www.illinois.gov/hfs/SiteCollectionDocuments/2014CHIPRAChildCoreSetDatabook.pdf>


# Many Players, Many Strategies



## Strategies:

- 1) Engage & educate partners
- 2) Enforce existing requirements
- 3) Play defense

# Engage & educate partners

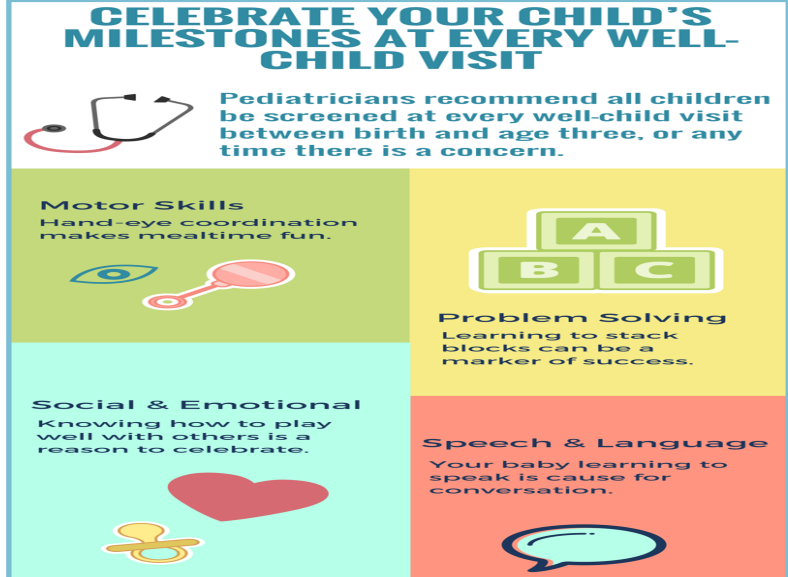


**SHRIVER CENTER**  
Sargent Shriver National Center on Poverty Law

**LEGAL COUNCIL**  
FOR HEALTH JUSTICE

**Ever Thrive Illinois**  
Champions for Healthy Communities

**Common goal:**  
Ensuring every child has best possible start in life and is well prepared to learn and grow up healthy.



**CELEBRATE YOUR CHILD'S MILESTONES AT EVERY WELL-CHILD VISIT**

Pediatricians recommend all children be screened at every well-child visit between birth and age three, or any time there is a concern.

**Motor Skills**  
Hand-eye coordination makes mealtime fun.

**Problem Solving**  
Learning to stack blocks can be a marker of success.

**Social & Emotional**  
Knowing how to play well with others is a reason to celebrate.

**Speech & Language**  
Your baby learning to speak is cause for conversation.

- 1:1 meetings with MCO's
- Facilitate presentations for HFS, MCO's & Providers
- Create clinical toolkits for providers
- Create education campaigns designed for consumers

# Enforce existing requirements

## HFS - MCO Model Contract

- ✓ Evaluate opportunities to improve MCO contract language.
  - Ex) clarify MCO's role in informing beneficiaries of EPSDT benefits
- ✓ Explore opportunities to expand school Medicaid reimbursement:
  - Ex) Healthy Schools Campaign

a. **EPSDT** Services to Enrollees Under Twenty-One (21) Years. All Enrollees under twenty-one (21) years of age should receive screening examinations including appropriate childhood immunizations at intervals as specified by the **EPSDT** Program as set forth in §§1902(a)(43) and 1905(a)(4)(B) of the Social Security Act and 89 Ill. Adm. Code 140.485. Contractor shall provide **EPSDT** services in conformance with the *Handbook for Providers of Healthy Kids Services* including future revisions.

- i. Contractor shall employ strategies to ensure that children receive comprehensive child health services, according to the Department's recommended periodicity schedule or more frequently, as needed, and shall perform provider training to ensure that best practice guidelines are followed in relation to well child services and care for acute and chronic health care needs.
- ii. Any condition discovered during the screening examination or screening test requiring further diagnostic study or treatment must be provided if within the scope of Covered Services. Contractor shall refer the Enrollee to an appropriate source of care for any required services that are not Covered Services. If, as a result of **EPSDT** services, Contractor determines an Enrollee is in need of services that are not Covered Services but are services otherwise provided for under the HFS Medical Program, Contractor will ensure that the Enrollee is referred to an appropriate source of care. Contractor shall have no obligation to pay for services that are not Covered Services.

# Play defense

- ✓ Policymakers hear a louder message of “When you cap Medicaid, you threaten children’s coverage”
- ✓ Exploring opportunities to maintain EPSDT coverage protections for kids in IL
  - Establish MOE for EPSDT eligibility, services, and public reporting ?


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## Medicaid Currently Covers All Medically Necessary Care for Kids

- Doctor services
- Clinic services
- Dental services
- Emergency room services
- Hospital services (inpatient and outpatient)
- Maternity care (special care during and after pregnancy)
- Surgery
- Medicines (prescription drugs)
- Lab and X-ray services
- Mental health treatment (inpatient and outpatient)
- Substance abuse treatment (inpatient and outpatient)
- Family planning services and supplies
- Medical supplies and equipment
- Transportation for emergency medical care
- Home health services
- Early intervention services
- Audiologist (hearing) services
- Eye glasses
- Optometrist (eye) services
- Podiatric (feet) services
- Chiropractic services
- Intermediate care for people who are developmentally disabled
- Care in skilled pediatric nursing facilities
- Nursing home services
- Regular checkups and shots
- for children
- Renal (kidney) dialysis services
- Nursing care
- Physical therapy, occupational therapy, speech therapy
- Hospice care
- Respiratory (breathing) equipment and supplies

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## Will Medicaid and CHIP Survive?



# EPSDT Broad Coverage = Broad Coalition



American Academy of Pediatrics  
Illinois Chapter



**Early Learning Council**



Illinois  
State Board  
of Education



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