

## **Section 1 Introduction - Maryland Healthy Kids/ Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program**

### **A. OVERVIEW**

**Medicaid**, or Medical Assistance (MA), is a joint federal and state program authorized under Title XIX of the Social Security Act to provide health and long-term care coverage to low-income people and others in certain categories. The State Medicaid Program is operated within the **Maryland Department of Health (MDH)**. Maryland Medicaid also operates similar programs for moderate to low-income children, who are not eligible for Medicaid. These are the [\*Maryland Children's Health Program \(MCHP\)\*](#) and MCHP Premium Programs. Since Medicaid, MCHP, and MCHP Premium provide children with the same comprehensive benefit package, this Manual will generally refer to the Programs as Medicaid/MCHP.

Most children in Medicaid/MCHP receive services through the [\*Maryland HealthChoice Program\*](#), a Statewide Medicaid managed care program. HealthChoice beneficiaries enroll in [one of nine managed care organizations \(MCO\)](#). MCOs that participate in the HealthChoice program are responsible for providing the full range of health care services covered by the Medicaid fee-for-service program, except for certain Medicaid-covered benefits that are “carved-out” and made available to enrollees outside the MCOs.

**The Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program** is a federal requirement that mandates that States cover certain benefits for Medicaid recipients from birth through 20 years of age that are not necessarily covered for individuals 21 years of age and older. The Program came into existence in 1967 after Congress passed the Section 1905(r) Amendment to the Social Security Act. States are allowed to develop their own EPSDT periodicity schedule with input from medical societies and organizations involved in child health.

In Maryland, the preventive care component of the EPSDT Program is known as the [\*Healthy Kids Program\*](#). The preventive health care services allow for early identification and treatment of health problems before they become medically complex and costly to treat.

Standards for the Healthy Kids Program are developed through collaboration with key stakeholders such as the MDH, the Maryland Chapter of the American Academy of Pediatrics, the University of Maryland School of Dentistry and the Maryland Department of the Environment.

The [\*Maryland Healthy Kids Preventive Health Schedule\*](#) (Refer to Section 2) closely correlates to the American Academy of Pediatrics periodicity schedule. The primary purpose of this manual is to provide clinical and administrative guidance in the implementation of the required preventive care standards of the Maryland Healthy Kids/EPSDT Program.

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### **B. HEALTHY KIDS PROGRAM ADMINISTRATION**

The Office of Medical Benefits Management (OMBM), administers the Maryland Healthy Kids Program. The Healthy Kids Program has a team of nurses who serve as regional consultants to MCOs and providers certified in the Program. This team performs a vital role by conducting performance improvement activities to assure that services rendered to Medicaid children and adolescents are meeting the Program standards.

The Medicaid Divisions which support the Healthy Kids/EPSDT Program are the Acute Care Administration, Quality Assurance, Customer Relations, Outreach and Care Coordination, and the Division of Children's Services. The Healthy Kids Program which is part of the Division of Children's Services, is responsible for policies that relate to the treatment components of the EPSDT Program. These components include dental services, vision, audiology, therapies, and other services provided only for children and adolescents under 21 years of age who are enrolled in Medicaid.

The Healthy Kids/EPSDT Program responsibilities include:

- Informing parents of eligible children under 21 years of age about the EPSDT/ Healthy Kids Program
- Ensuring that EPSDT screening services are available from Program-certified primary care providers enrolled in the MCOs and the fee-for-service Medicaid Program
- Ensuring that medically necessary treatment services are available
- Communicating and coordinating with agencies and programs such as local health departments (LHDs), Women Infants & Children's Services (WIC), Head Start and foster care
- Providing funds to LHDs to collaborate with the MCOs and provide support services such as outreach, appointment scheduling, transportation assistance, tracking, and case management services to assist with treatment for identified problems and assure continuity of care

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### C. PROVIDER CERTIFICATION AND QUALIFICATIONS

In order to provide services to a Medicaid recipient, a provider must enroll with Maryland Medicaid and may contract with one or more of the MCOs. The Maryland Healthy Kids Program must certify all primary care providers who provide health care services to Medicaid/MCHP recipients under 21 years of age. The certification requirement applies to PCPs contracted with MCOs and PCPs providing care to recipients not enrolled with an MCO who have a red and white Medicaid card (commonly referred to as “fee-for-service MA”). Providers who need certification as primary care providers solo practices, group practices, and rendering providers within group practices who are:

- Board certified providers in pediatrics, family medicine, and internal medicine
- Licensed physicians and osteopaths, certified nurse practitioners, and physician assistants
- Health care providers such as federally qualified health centers, hospital outpatient department clinics, and school-based health centers

To participate in the Program, the provider must agree to adhere to the standards of preventive health care described in the Maryland Healthy Kids Program Manual. Providers are required to follow the [Maryland Healthy Kids Preventive Health Schedule](#) (Refer to Section 2). In addition, federal and state regulations stipulate that preventive care services are required for Medicaid enrolled recipients *under* 21 years of age. The [Provider Application for Certification and Participation](#) (Refer to Section 1, Addendum) outlines the conditions for participation. The Maryland Healthy Kids Program certification requires a face-to-face meeting with a Healthy Kids Program Nurse Consultant.

After the certification process is complete a [Provider Certification Letter](#) is sent to the PCP and MCO. The letter should be saved since it is required for MCO credentialing (Refer to Section 1, Addendum). The provider’s Maryland Medicaid number becomes the EPSDT Certification number. When a **new** provider joins the practice, the provider should complete the following steps:

1. **Complete the online application for a MA number on the Electronic Provider Revalidation and Enrollment Portal [ePREP Provider Portal](#).**
2. If the new provider already has an active MA number, the ePREP application process will serve to update the provider’s current practice address and link the provider to the group practice number.
3. **Once the application has been submitted through ePREP please check the website or call Provider Enrollment at 1-844-463-7768 for application status.**
4. Contact the Maryland Healthy Kids Program at 410-767-1836 to schedule a

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certification visit with the Program consultant for your area. \*This step should be completed once the provider has a Medicaid number or has started the application process in ePREP.

Once a provider is certified and he/she demonstrates compliance with the Healthy Kids Program, the certification stays with the provider **for 5 years** regardless of whether the provider changes practice sites or opens his or her own private practice . **Therefore, it is important to notify the [Healthy Kids Program Nurse Consultant](#) for your area of any changes to your practice** (Refer to Section 8). **MDH mails transmittals based on this information, so it is important to keep practice and provider information current.** *Providers who participate in the Healthy Kids Program receive specialized services offered by the state and local health departments.*

### **Healthy Kids Program Nurse Consultant Services**

- Certification of new providers (Pediatric, Family Practice, and Internal Medicine) entering group practices or establishing new solo practices
- Certification of new and established practices
- Notifying providers of updates and changes to the Program as applicable
- Maintenance of applicable clinical and Program manuals/materials online at: [Maryland Healthy Kids Program](#)
- Interpretation of Medicaid health policies and federal/state regulations
- Orientation and staff training in Program standards and procedures
- Monitoring of performance regarding Program implementation through medical record reviews
- Assistance with Medicaid billing and MCO encounter data reporting
- Education of providers about MCO and LHD referral process for outreach and health related services

### **Additional Services from MDH**

- Distribution of child health pamphlets and Program forms to aid Program implementation
- Availability of resources and referrals for community services from the Maryland Children's Health Program Information Line at **1-855-642-8572**
- Provision of free vaccines through the Vaccines for Children Program
- Assistance in meeting the requirements of timely services to children with special needs

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### D. LOCAL HEALTH DEPARTMENTS, HEALTHCHOICE AND HEALTHY KIDS PROGRAMS\*

Each local health department receives direct funding from the Medical Assistance Program to perform a wide range of administrative functions for the Program such as:

- Conduct Medical Assistance eligibility determinations for children and pregnant women applying for the Maryland Children's Health Program
- Provide assistance to families when children under 21 years of age need to access follow-up treatment services resulting from a Healthy Kids preventive care screen
- Assist high risk recipients to access necessary health care services
- Educate recipients about EPSDT, the health care delivery systems, including HealthChoice, and the Maryland Public Behavioral Health System
- Serve as ombudsman between recipients and MCOs
- Provide transportation assistance to medically necessary health care services covered by Medicaid

*\*Availability of these services varies according to program priorities established by individual local health departments.*

#### Eligibility Determination Units - Maryland Children's Health Program (MCHP)

Families with children can apply for MCHP through the *Maryland Health Connection*.

Applications can be submitted:

- Online at [Maryland Health Connection](#). To apply, customers have to create a user account, then go to the "Start New Application" from the Quick Links on the Account Home page.
- By calling the **Maryland Health Connection Call Center at 1-855-642-8572**.
- In-person at the *recipient's* [Local Health Department](#), or [Local Department of Human Services](#).

#### LHD Administrative Care Coordination Units (ACCUs)

The [Local Health Department Administrative Care Coordinators Unit](#) is the single point of entry for referrals to the local health department (Refer to Section 8). The ACCU coordinates efforts

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with the MCOs in providing outreach and education to Medicaid recipients (Refer to Section 5). The ACCU can be contacted by calling the [Local Health Department](#) where the child resides (Refer to Section 8). The ACCU accepts referrals from primary care providers and the MCOs for assistance with bringing non-compliant and high-risk recipients into care according to the following criteria:

- Children, 0-2 years of age, who have missed two consecutive Healthy Kids appointments
- Any child/adolescent under 21 years of age with an identified health problem who has missed two consecutive appointments for follow-up treatment
- Pregnant women who have missed two consecutive prenatal appointments

Refer to the Managed Care Organization's (MCO's) Provider Manual for specific instructions on how and when to make referrals to the ACCU or the MCO. Regarding pregnant women, contact the MCO outreach and/or case management department to initiate follow-up and outreach efforts after the recipient has missed two consecutive appointments within a 60-day period. Follow-up and outreach can be in the form of a letter, email, text, postcard or phone call to the recipient. The date and method should be documented in the child's record.

**Ombudsman Program** The HealthChoice Program is required to provide an Ombudsman to assist members who are experiencing a dispute or dissatisfaction with their MCO regarding medical services. The local health departments operate the local component of this Program under the direction of the HealthChoice Complaint Resolution Unit (CRU) or LHD Ombudsman when contacted for specific information about a particular issue.

The **Medicaid HealthChoice Help Line** at **1-800-284-4510** is available for members to call for education, inquires, or to request assistance with resolving problems with their MCO. Providers may call this number to resolve problems related to access to care on behalf of enrollees. Providers with billing or claim issues please email [mdh.healthchoiceprovider@maryland.gov](mailto:mdh.healthchoiceprovider@maryland.gov).

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### **Transportation Services**

The Medicaid Program provides transportation grants to each local jurisdiction to assist clients with transportation to Medicaid covered services. Contact information can be found in the [Local Transportation Contacts List](#) (Refer to Section 8). The MCO may also provide limited transportation assistance.

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### **E. MEDICAID MANAGED CARE ORGANIZATIONS (MCOs)**

#### **Contract Agreements Between the MCO and the Primary Care Provider**

Primary Care Providers (PCPs) establish individual contracts with one or more of the nine MCOs. PCPs are responsible for familiarizing themselves with the content of the MCO Provider Manuals. These manuals reinforce service delivery requirements for the Medicaid recipients according to MCO policy and State regulations. Minor differences from one MCO to another are provided in the manuals that include, but are not limited to, MCO encounter data reporting requirements and MCO preauthorization processes. Providers who wish to enroll in one or more of the MCOs should contact the Provider Relations Department of that MCO. **HealthChoice regulations require that MCOs assign recipients under 21 years of age to a Healthy Kids certified PCP.**

Exceptions can be made if the parent specifically requests that their child be assigned to a non-certified PCP, e.g., when the child has a chronic condition and receives ongoing care from a specialist. Subcontracting components of Healthy Kids preventive care services is allowed, but can lead to fragmentation of care for the recipient and difficulty in managing the recipient's care. However, where subcontracting agreements exist, the PCP is required to have a copy of the preventive care service rendered by the subcontracted provider in the child's medical record. The regulations that govern the Medicaid HealthChoice Program are 10.67.01-.13 and can be viewed at the [Code of Maryland Regulations](#). Specific information about each of the MCOs, including preauthorization phone numbers, customer service lines, 24-hour Nurse Help Lines, as well as pharmacy and vision services vendors, can be found in [HealthChoice Managed Care Organization Resource List](#).

#### **MCO Newborn Coordinator Roles and Responsibilities**

Infants born to mothers who are enrolled in an MCO are automatically enrolled in the mother's MCO. Each MCO has a designated [MCO Newborn Coordinator](#) (Refer to Section 8) who serves as a point of contact for providers with questions or concerns related to eligibility and provision of services to newborns within the first 60 days of life. The Newborn Coordinator will be available through a toll-free line, Monday through Friday, during normal working hours 9:00 a.m. to 5:00 p.m. Services provided by the Newborn Coordinator are outlined in the Provider Action Grid (Refer to Section 8).

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The Newborn Coordinator will be able to:

- Research the eligibility of a newborn whose MCO assignment is in question and confirm for the provider the MCO to which the newborn belongs
- Interfacing with the Medicaid Enrollment Broker to resolve enrollment concerns
- Making retroactive provider enrollment and capitation adjustments
- Coordinating and authorizing both in-network and out-of-network care as appropriate
- Coordinating with MCO ancillary provider networks, pharmacy or durable medical equipment, to assure appropriate delivery of care
- Requesting newborn ID card
- Facilitating resolution of claims for services to newborns

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### **F. HEALTHY KIDS PROGRAM PERFORMANCE IMPROVEMENT STANDARDS**

The Maryland Healthy Kids Program is committed to ensuring that children enrolled in Medicaid/MCHP receive quality health care services. Performance improvement activities performed by the Healthy Kids nurse consultants include practice based medical record reviews and office staff training. These activities ensure continuous improvement in the delivery of preventive care services to children.

The Healthy Kids Program continues to conduct office-based medical record reviews at participating practice sites. By signing the *Medicaid Provider Agreement in ePREP* and the *Healthy Kids Program Provider Application for Certification and Participation* (Refer to Section 1, Addendum), providers agree to these reviews as defined by the conditions for certification. Further, the recipient consents to having their records reviewed when they enroll in Medicaid and receive benefits.

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### **G. HIPAA PRIVACY**

Maintaining the confidentiality of medical information is of critical importance. For more information on HIPAA, please review the [\*Health Insurance Portability and Accountability Act\*](#).