PROVIDER*Update*





REGULATORY

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EPSDT Services Reminder

APL 19-010 clarifies EPSDT services for members under age 21

Below are key reminders when providing Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services for members under age 21:

- There is a more robust range of medically necessary services than for adults that include standards set forth in federal and state law. This includes the contractual obligation to provide the EPSDT benefit in accordance with the AAP/Bright Futures periodicity schedule.
- Services that maintain or improve the child's current health condition are covered under EPSDT because they ameliorate a condition. A service does not need to cure a condition to be covered under EPSDT.
- You must not impose service limits on any EPSDT benefit other than medical necessity. You must determine if a service is medically necessary for each child on a case-by-case basis, taking into account the particular needs of the child.

The Department of Health Care Services (DHCS) clarifies Medi-Cal managed care health plans' (MCPs') responsibilities to provide EPSDT services to eligible members under age 21 in All Plan Letter (APL) 19-010. Refer to APL 19-010 for existing state and federal laws and regulations about the provision of Medi-Cal services, including EPSDT. APL 19-010 does not represent any change in policy.

Additional information

Providers are encouraged to access the provider portal online at provider.healthnet.com for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions about the information in this update, contact the Access and Availability Unit via email at Access_IP@healthnet.com or CalViva Health at 1-888-893-1569.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- O Ancillary Providers

PROVIDER SERVICES

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