#### Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid

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MassHealth All Provider Bulletin 309 February 2021

**TO**: All Providers Participating in MassHealth Who Render Early and Periodic Screening,

Diagnostic, and Treatment (EPSDT) Services

FROM: Daniel Tsai, Assistant Secretary for MassHealth

**RE:** Reminder of the EPSDT Schedule and Responsibilities

# **Background**

This bulletin reminds providers of the requirement to follow the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) schedule when serving children enrolled in MassHealth. These requirements apply to any provider rendering well child and other medically necessary primary care and dental services to a MassHealth-enrolled member, regardless of whether the member is enrolled in a health plan or receiving services on a fee-for-service basis. Changes to newborn managed care enrollment detailed in <u>All Provider Bulletin 305</u>, effective January 1, 2021, do not change a provider's obligation to render medically necessary EPSDT services to MassHealth members.

## **Medical Services and Screening Requirements**

The <u>EPSDT Medical Protocol and Periodicity Schedule</u> (the Medical Schedule) consists of screening procedures arranged according to the intervals or age levels at which each procedure should be provided. See 130 CMR 450.140 through 450.150 for more information about EPSDT services and Preventive Pediatric Healthcare Screening and Diagnosis (PPHSD) services. MassHealth updated the Medical Schedule and EPSDT Dental Protocol and Periodicity Schedule found in <u>Appendix W</u> of the MassHealth provider manuals in December 2020. Providers should carefully review this updated schedule.

The Medical Schedule reflects required well and preventive child healthcare services and screenings that must be offered to MassHealth members. If the clinical needs of a child justify deviation from this schedule, the provider must document this fact in the member's medical record, including the provider's clinical judgment and justification for that deviation.

Pediatric preventive healthcare visits should contain the components explained in the descriptions in the Medical Schedule and, at a minimum, occur at the following ages:

- newborn;
- three to five days;
  - o newborns discharged from the hospital fewer than 48 hours after delivery should be evaluated within 48 hours of discharge;
  - newborns discharged from the hospital 48 hours or more after delivery should be evaluated within 48 to 72 hours after discharge;

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- one, two, four, six, and nine months;
- 12, 15, 18, 24, and 30 months; and
- annually from three to 21 years.

At a child's initial appointment, the provider should schedule follow-up visits for the child in accordance with EPSDT guidelines to ensure ongoing care for the child. Providers should carefully review <u>All Provider Bulletin 305</u> for information on how to help parents and guardians of newborns establish MassHealth eligibility for the child and ensure newborns are enrolled in a health plan.

Providers are also encouraged to review <u>All Provider Bulletin 301</u> titled "Impact of COVID-19 on Behavioral Health and the Importance of Perinatal and Pediatric Behavioral Health Screening during the Pandemic." Primary care providers play an essential role in identifying behavioral health needs in children and caregivers. Such screenings are of particular importance in communities affected by longstanding health inequities. For additional information on pediatric screening requirements as well as coverage of perinatal depression screenings for caregivers, please reference <u>All Provider Bulletin 301</u>.

#### **MassHealth Website**

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### **Questions**

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