



2014

Managed Care Health Plans' HCY/EPSTD Performance Report



*Healthy
Children and Youth –
Early and Periodic
Screening, Diagnostic and
Treatment*

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services. This benefit ensures that children under the age of 21 who are enrolled in Medicaid receive age-appropriate screening, preventive services, and treatment services that are medically necessary to correct or ameliorate any identified conditions – the right care to the right child at the right time in the right setting.

Early	Assessing and identifying problems early
Periodic	Checking children's health at periodic, age-appropriate intervals
Screening	Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
Diagnostic	Performing diagnostic tests to follow up when a risk is identified, and
Treatment	Control, correct or reduce health problems found.

EPSDT Services

Missouri’s Managed Care Health Plans are required to provide comprehensive services and furnish all Medicaid coverable, appropriate, and medically necessary services to children from birth to age twenty (20) needed to correct and ameliorate health conditions, based on certain federal guidelines. Missouri’s program is known as the Healthy Children and Youth (HCY) Program. HCY/EPSDT is made up of the following screening, diagnostic, and treatment services:

Screening Services

- A full HCY/EPSDT well child visits includes all of the components listed below.
 - Comprehensive health and developmental history including assessment of both physical and behavioral health developments
 - Comprehensive unclothed physical exam
 - Appropriate immunizations (according to the Advisory Committee on Immunization Practices)
 - Laboratory tests as indicated (including lead toxicity screening)
 - Annual verbal lead assessment beginning at age six (6) months and continuing through age seventy-two (72) months
 - Blood level testing is mandatory at twelve (12) and twenty-four (24) months or annually if residing in a high-risk area of Missouri as defined by Department of Health and Senior Services regulation 19 CSR 20-8.030
 - Health Education (anticipatory guidance including child development, healthy lifestyles, and accident and disease prevention)

- Hearing screening
- Vision screening
- Dental screening (oral exam by primary care provider as part of comprehensive exam)

Diagnostic Services

When a screening examination indicates the need for further evaluation of an individual's health, diagnostic services must be provided. Health Plans are required to provide referrals without delay and follow-up to ensure the enrollee receives a complete diagnostic evaluation.

Other Necessary Health Care Services

Health Plans are required to cover all follow-up diagnostic and treatment services deemed medically necessary to ameliorate (defined as “prevent from worsening”) defects, physical and behavioral health issues, and conditions discovered by the screening services or correct a problem discovered during an HCY/EPSTD visit. All medically necessary diagnosis and treatment services must be provided as long as they are permitted under the Medicaid statute, whether or not they are covered under the State’s Medicaid plan, and without any regard to any restrictions the State may impose on services for adults.

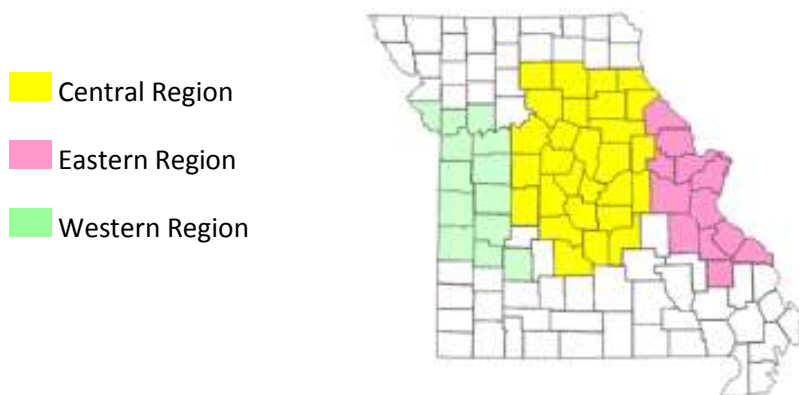
Treatment

Necessary health care services must be made available for treatment of all physical and mental illnesses or conditions discovered by any screening and diagnostic procedures.

EPSTD Data

Health Plans report HCY/EPSTD well child visits through encounter data submissions. The MO HealthNet Division uses the encounter data submissions and other data sources to determine health plan compliance with CMS requirements that eighty percent (80%) of eligible members under the age of twenty-one (21) receive HCY/EPSTD well child visits in accordance with the periodicity schedule. The MO HealthNet Division uses the participant ratio as calculated using the CMS 416 reporting methodology for measuring the health plan’s performance.

The managed care coverage area addressed in the report includes the following highlighted geographic areas:



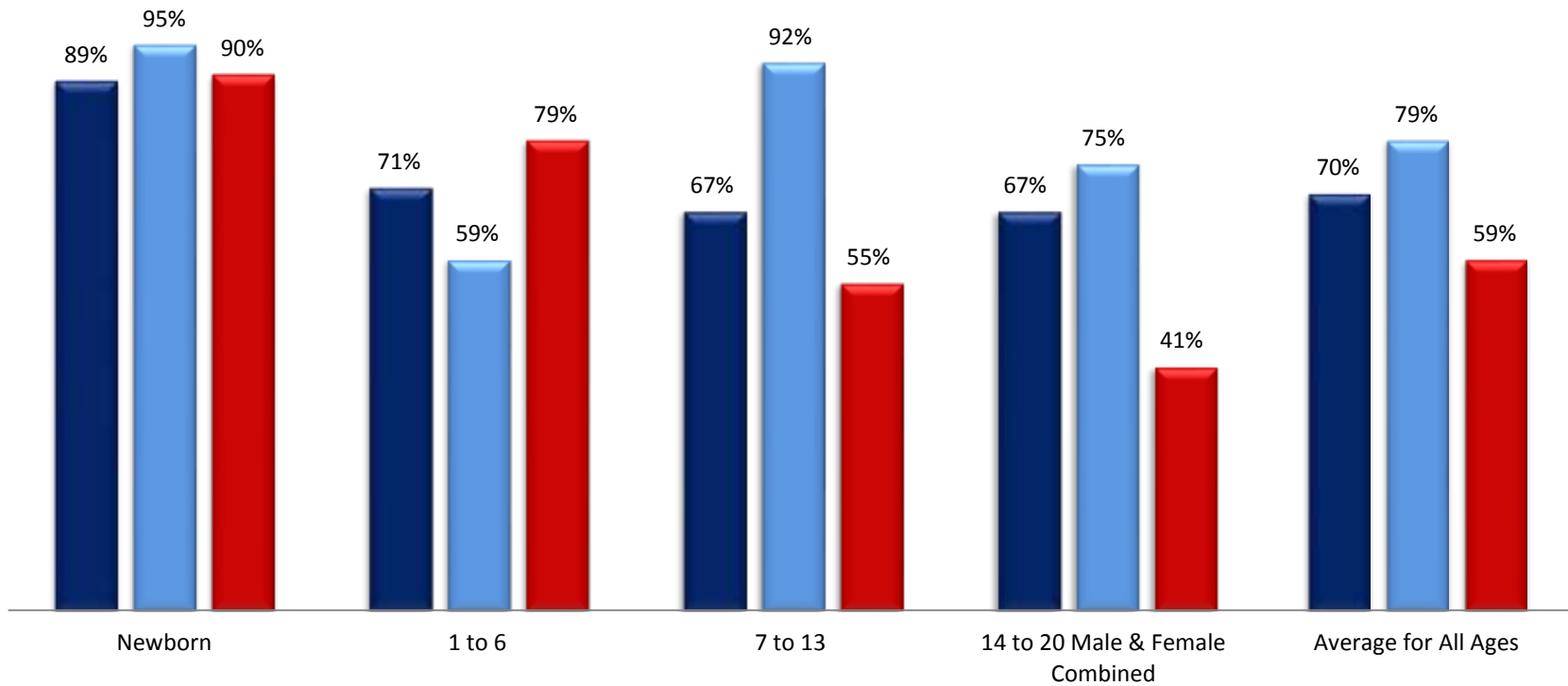
State Fiscal Year 2014 MO HealthNet EPSDT Performance

July 1, 2013 – June 30, 2014

Percentage of Actual Screenings to Eligible Medicaid Participants by Age Group

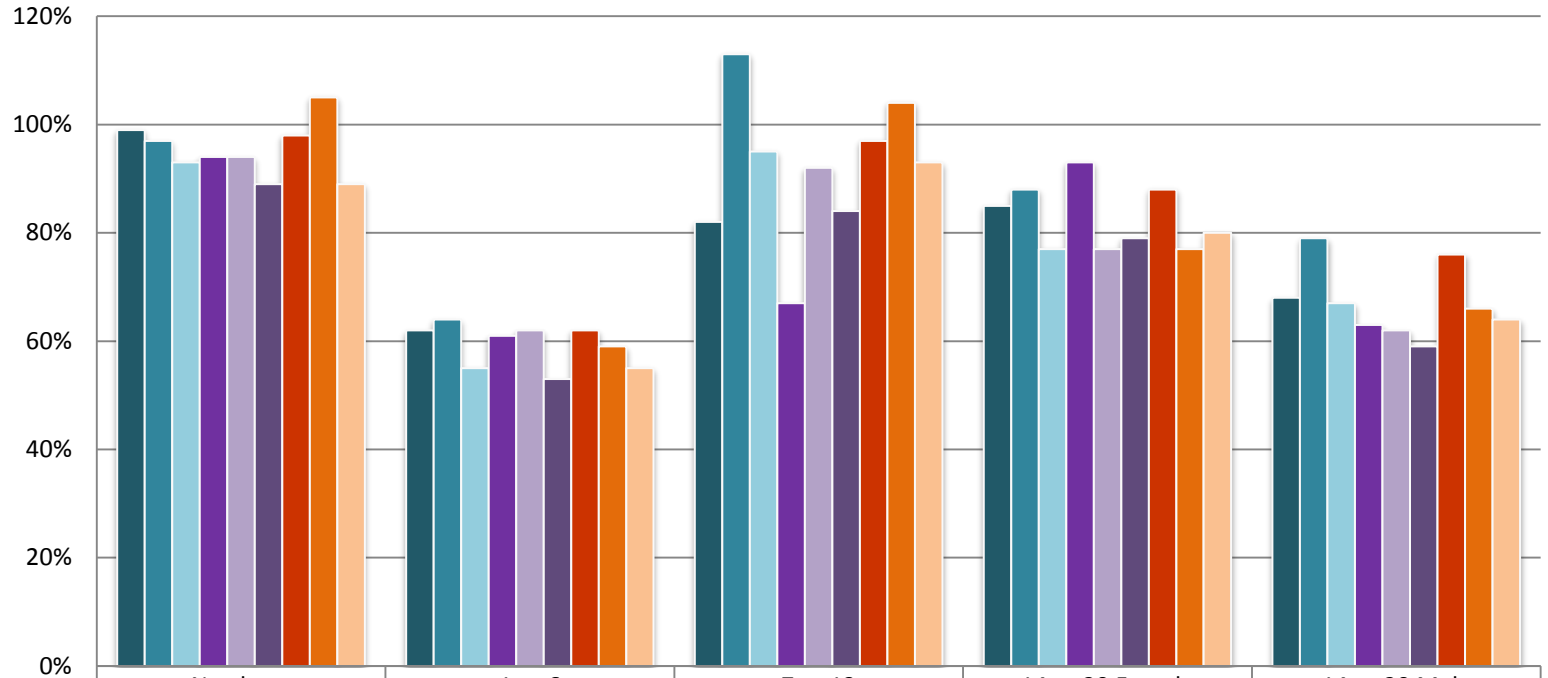
**Requirement - 80%*

■ Missouri Fee-for-Service & Managed Care ■ Missouri Managed Care ■ Nationally



Percentage of Eligible Participants Receiving at least One Initial or Periodic Screen by Managed Care Health Plan

* Requirement - 80%

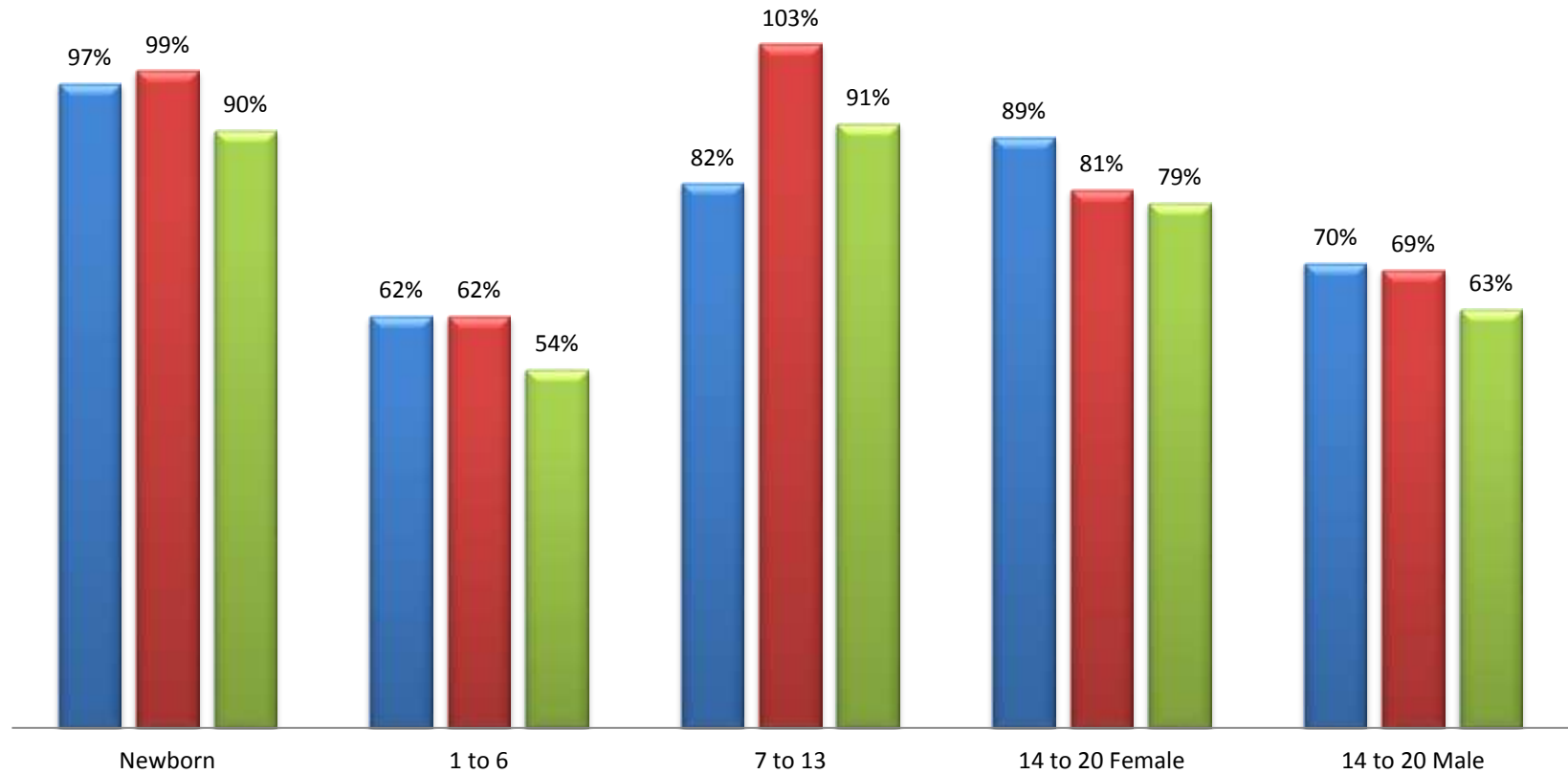


	Newborn	1 to 6	7 to 13	14 to 20 Female	14 to 20 Male
■ Healthcare USA Central	99%	62%	82%	85%	68%
■ Healthcare USA Eastern	97%	64%	113%	88%	79%
■ Healthcare USA Western	93%	55%	95%	77%	67%
■ Home State Central	94%	61%	67%	93%	63%
■ Home State Eastern	94%	62%	92%	77%	62%
■ Home State Western	89%	53%	84%	79%	59%
■ Missouri Care Central	98%	62%	97%	88%	76%
■ Missouri Care Eastern	105%	59%	104%	77%	66%
■ Missouri Care Western	89%	55%	93%	80%	64%

Percentage of Eligible Managed Care Participants Receiving at least One Initial or Periodic Screen by Region

■ Central ■ Eastern ■ Western

**Requirement - 80%*



Health Plan Strategies for Eligible Participants to Obtain Screenings

Missouri's health plans use innovative, cooperative ways to enhance care coordination and delivery of HCY/EPSDT and have an established process for reminders, follow-ups, and outreach to members including:

- Notifying the parent(s) or guardian(s) of children of the needs and scheduling of periodic well child visits according to the periodicity schedule.
 - Providing written notification to families with eligible children when appropriate well child visits are due.
- Contacting new members within thirty (30) calendar days of health plan enrollment to provide assistance in accessing HCY/EPSDT well child visit services.
- Providing assistance to members in accessing subsequent HCY/EPSDT well child visits in accordance with the periodicity schedule.
- Offering transportation and scheduling assistance.
- Following up with families that have failed to access well child visits after one hundred and twenty (120) calendar days of when the well child visit was due.
- For those children who have not had well child visits in accordance with the periodicity schedule established by the state agency, the health plans document their outreach and educational efforts to the parent or guardian informing them of: the importance of well child visits; that a well child visit is due; how and where to access services including necessary transportation.
- Providing participant's PCP, on a monthly basis, a list of the eligible children who are not in compliance with the periodicity schedule.