



EPSDT SERVICES

REQUIREMENTS FOR COVERAGE OF EARLY AND PERIODIC SCREENING, DIAGNOSTIC, AND TREATMENT SERVICES (EPSDT) FOR MEDICAID BENEFICIARIES UNDER THE AGE OF TWENTY-ONE (21) MSM Chapter 1500

This is an advisory notification to the Molina Healthcare of Nevada (MHNV) contracted provider network regarding the responsibility of providers to provide Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services to eligible children under the age of 21. This policy applies to all children and seeks to reinforce existing state and federal laws and regulations regarding the provision of Medicaid services.

BACKGROUND

The EPSDT benefit provides comprehensive screening, diagnostic, treatment, and preventive health care services for children under the age of 21 who are enrolled in Medicaid and is key to ensuring that children who are eligible for EPSDT services receive appropriate preventive, dental, mental health, developmental, and specialty services. This benefit is more robust than what is covered for adults and strives to ensure that eligible children receive early detection and preventive care; in addition to medically necessary treatment services, so that health problems are averted or diagnosed and treated as early as possible.

REQUIREMENTS

MHNV contracted network providers are required to ensure the provision of screening, preventive, and medically necessary diagnostic and treatment services for individuals under the age of 21.

EPSDT services, at minimum, include the following:

1. **Screening Services.** Screening services include a comprehensive health and developmental history, a comprehensive unclothed physical exam, appropriate immunizations, laboratory tests, and health education.
2. **Vision Services.** Vision services include diagnosis and treatment for defects in vision, including eyeglasses.
3. **Dental Services.** Dental services include treatment for relief of pain and infections, restoration of teeth, and maintenance of dental health.
4. **Hearing Services.** Hearing services include diagnosis and treatment for defects in hearing, including hearing aids.
5. **Other Necessary Health Care Services.** These services include developmental/behavioral assessments, diagnostic services, treatments, and measures to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services.

Molina Healthcare members should be referred to a network dental provider at the eruption of the first tooth or by twelve (12) months of age. The parent(s) or guardian should receive a list of local dentists

who are within Molina Healthcare's network. If there are obvious dental problems prior to this age, the child should be referred to a dentist. A periodic oral examination is recommended once each year.

If you have any questions or require further clarification regarding this notification, please contact your Molina Healthcare's Provider Services Representative or email

NVProviderRelations@MolinaHealthcare.com.

To get your child scheduled for EPSDT visit and begin cultivating a healthier and happier tomorrow with routine EPSDT visits.

Contact Molina Member Services (833) 685-2102 (TTY/TDD: 711) Email:

NVMemberServices@Molinahealthcare.com.