

Humana Healthy Horizons in Virginia Early and Periodic Screening, Diagnostic and Treatment Provider Resource Guide

Cardinal Care Managed Care Contract in Virginia

This provider resource guide includes resources and information to assist network and Virginia-designated Early and Periodic Screening, Diagnostic and Treatment (EPSDT) providers in working with Humana Healthy Horizons®, serving Cardinal Care Managed Care Contract in Virginia. You can find updates to this provider resource guide at [Humana.com/HealthyVA](https://www.humana.com/HealthyVA).

EPSDT program overview

EPSDT benefits assess physical and mental defects to provide treatment to correct, ameliorate or prevent worsening defects, physical and mental illnesses, and conditions discovered by the screening services for members younger than 21. EPSDT includes periodic screenings (e.g., wellness visits) and interperiodic screenings as necessary, as well as vision, dental and hearing services. In some instances, conditions identified by EPSDT screenings can be treated with services that are not covered. Any treatment service that is not otherwise covered under the state plan for medical assistance can be covered for a child through EPSDT, as long as the service is allowable under Section 1905(a) of the Social Security Act.

Humana Healthy Horizons offers tools to providers to help identify Humana Healthy Horizons-covered patients who may have additional opportunities for care. Humana Healthy Horizons-developed tools rely on criteria identified in Healthcare Effectiveness Data and Information Set (HEDIS®) measures related to EPSDT services, including well-child visits and immunizations. These tools and reports are updated on a regular basis.

EPSDT exam frequency

The Humana Healthy Horizons EPSDT Periodicity Schedule is updated frequently to reflect current recommendations of the American Academy of Pediatrics (AAP) and Bright Futures.

Humana
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in Virginia

To view updates to the schedule, please visit the **Bright Futures website** and review the complete periodicity chart.

Infancy:

- | | |
|------------------------|-------------|
| • Younger than 1 month | • 6 months |
| • 2 months | • 9 months |
| • 4 months | • 12 months |

Early childhood:

- | | |
|-------------|-------------|
| • 15 months | • 30 months |
| • 18 months | • 3 years |
| • 24 months | • 4 years |

Middle childhood:

- | | |
|-----------|------------|
| • 5 years | • 8 years |
| • 6 years | • 9 years |
| • 7 years | • 10 years |

Adolescence and young adults:

- | | |
|------------|------------|
| • 11 years | • 15 years |
| • 12 years | • 16 years |
| • 13 years | • 17 years |
| • 14 years | |

EPSDT screenings

EPSDT screenings include periodic and comprehensive health assessments or screenings from birth to 21, at intervals specified in the EPSDT Medical Periodicity Schedule. The schedule observes guidelines established by AAP policy statements and other clinical guidelines with requirements maintained by the Virginia Department of Medical Assistance Services (DMAS). EPSDT medical screenings include:

- A comprehensive health and developmental history, including assessments of both physical and mental health development to include reimbursement for developmental screens (Current Procedural Terminology CPT® 96110) rendered by providers other than the primary care provider (PCP)
- A comprehensive unclothed physical examination, including:
 - Vision and hearing screening
 - Dental inspection (per www.aapd.org)
 - Nutritional assessment
 - Height/weight and body mass index assessment

Humana requires pediatric PCPs to incorporate the use of a standardized developmental screening tool for children consistent with AAP policy statements and clinical guidelines. AAP policy recommends routine surveillance (assessing for risk) at all well-child visits and screenings using a standardized tool. Developmental screenings must be documented in the medical record using a standardized screening tool.

- Appropriate immunizations according to age, health history and the schedule established by the Advisory Committee on Immunization Practices (ACIP) for pediatric vaccines
 - Immunizations must be reviewed at each screening examination and necessary immunizations should be administered at the time of the examination. Humana also covers COVID-19 vaccine counseling visits for children and youth under EPSDT.
- Appropriate laboratory tests
 - The following recommended sequence of screening laboratory examinations must be covered by Humana; additional laboratory tests may be appropriate and medically indicated (e.g., for ova and parasites) and must be obtained as necessary:
 - Hemoglobin/hematocrit
 - Tuberculin test (for high-risk groups)
 - Blood lead testing that includes venous and/or capillary specimen (finger stick), in accordance with EPSDT periodicity schedules and guidelines that use blood level determinations as part of scheduled periodic health screenings appropriate to age and risk
 - ◊ A blood lead test result equal to or greater than 5 ug/dL obtained by capillary specimen (finger stick) must be confirmed using a venous blood sample.

Additionally, an oral inspection must be performed by the EPSDT-screening provider as part of each physical examination for a child at any age. Tooth eruption, caries, bottle tooth decay, developmental anomalies, malocclusion, pathological conditions and dental injuries must be noted. The oral inspection is not a substitute for a complete dental evaluation provided through direct referral to a dentist. Dental fluoride varnish provided by a non-dental medical provider in accordance with AAP guidelines and billed on a CMS 1500 form is covered.

Contracted PCPs or other screening providers must make an initial direct referral to a dentist at the child's 6-month/biannual screening. The dental referral must be made at the initial medical screening regardless of the periodicity schedule for any child aged 3 or older unless it is known and documented the child already receives regular dental care. When a screening indicates a need for dental services at an earlier age, a referral must be made for needed dental services. Dental referrals can be made for affected members as early as the neonatal examination.

Providers working with children younger than 21 must have experience in addiction treatment with children and adolescents.

Humana Healthy Horizons monitors provider compliance with EPSDT services. Humana Healthy Horizons requires its network providers notify Humana promptly in the event a screening for a member eligible for EPSDT services reveals the need for other healthcare services and the provider is unable to make an appropriate referral for those services. Once notification is received, Humana secures an appropriate referral and contacts the member to offer scheduling assistance and transportation for members lacking access to transportation.

EPSDT-covered services

For a comprehensive list of all EPSDT services covered by Humana Healthy Horizons, please review the appendix of the provider manual at [Humana.com/HealthyVA](https://www.humana.com/HealthyVA).

EPSDT hearing services

All newborn infants must receive a hearing screening after birth and before discharge from the hospital. Those children who did not pass the newborn hearing screening, those who were missed and those who are at-risk for potential hearing loss should be scheduled for evaluation by a licensed audiologist.

Periodic auditory assessments appropriate to age, health history and risk, which include assessments by observation (subjective) and/or standardized tests (objective), must be provided at a minimum at intervals recommended by DMAS' EPSDT periodicity schedule. At a minimum, these services must include diagnosis of and treatment for defects in hearing, including hearing aids. At a minimum, hearing screenings must include observation of an infant's response to auditory stimuli. A speech and hearing assessment must be part of each preventive visit.

EPSDT vision services

Periodic vision assessments appropriate to age, health history and risk, which includes assessments by observation (subjective) and/or standardized tests (objective), must be provided in accordance with DMAS' EPSDT periodicity schedule. Vision screening for infants must include, at a minimum, eye examination and observation of responses to visual stimuli. For older children, screening for visual acuity must be done. At a minimum, these services must include diagnosis of and treatment for defects in vision, including eyeglasses. Glasses to replace those that are lost, broken or stolen are also covered. A variety of lenses and frames are available to children receiving vision services in any setting.

Blood lead screening

In accordance with Virginia's reportable disease regulations at 12 VAC 5-90-215, Humana Healthy Horizons requires its contracted laboratories to report detectable blood lead levels for its members to the local health department within 3 days. Lead reportable levels, consistent with 12 VAC 5-90-10, includes any detectable blood lead level in children 15 and younger and levels greater than or equal to 5 µg/dL in a person older than 15. Providers must report children's blood lead levels greater than or equal to 5 µg/dL using the EP-1 form on **the Virginia Department of Health website**.

EPSDT immunizations and vaccinations

Providers must render immunizations in accordance with EPSDT periodicity schedules specified in the most current ACIP recommendations while conducting EPSDT screenings.

All PCPs who administer childhood immunizations must enroll in the Virginia Vaccines for Children (VVFC) program, administered by the Virginia Department of Health. PCPs must not routinely refer Medicaid members to the local health department to receive vaccines. To the extent possible and as permitted by Virginia statute and regulations, providers must participate in the statewide immunization registry database.

Early intervention services

Early intervention services (EIS) are available to qualified individuals through EPSDT. Children may be eligible to receive EIS from birth to age 3. EIS are not medically indicated for children 3 and older. EIS are designed to meet the developmental needs of each child and the child's family related to enhancing the child's development. EIS are provided to children who have:

1. a 25% developmental delay in 1 or more areas of development
2. atypical development, **or**
3. a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay

In Virginia, the EIS program is called Infant and Toddler Connection of Virginia and is managed by Department of Behavioral Health and Developmental Services (DBHDS). DBHDS contracts with 40 local lead agencies to facilitate implementation of local EIS statewide and also certifies EIS providers and service coordinators/case managers. EIS must be recommended by the child's PCP or other qualified EPSDT screening provider as necessary to correct or ameliorate a physical or mental condition. When a developmental delay is identified by the provider for members younger than 3, appropriate referrals must be made to the Infant and Toddler Connection and must be documented in the member's records.

Well-baby and well-child care

Humana Healthy Horizons covers all routine well-baby and well-child services recommended by the AAP Advisory Committee, including routine office visits with screenings, health assessments, physical exams, routine lab work, age-appropriate immunizations, lead blood testing and investigation and well-child services.

The following services must be rendered for the routine care of a child:

- Well-child visits rendered at home, office and other outpatient provider locations are covered at birth and on an ongoing schedule, according to the AAP-recommended periodicity schedule.
- Annual vaccinations without age limits and immunizations, in accordance with AAP-recommended immunizations for children and adolescents.
- Hearing services: All newborn infants must be given a hearing screening before discharge from the hospital after birth. Those children who did not pass the newborn hearing screening, those who were missed and those who are at-risk for potential hearing loss should be scheduled for evaluation by a licensed audiologist.
- Periodic auditory assessments: Auditory assessments used should be appropriate to age, health history and risk; auditory assessments include assessments by observation (subjective) and/or standardized tests (objective). At a minimum, these services must include diagnosis of and treatment for defects in hearing, including hearing aids.

EPSDT documentation requirements

Services provided under EPSDT are subject to the following additional documentation requirements:

- The medical record must indicate which age-appropriate screening was provided in accordance with the AAP and Bright Futures periodicity schedule and all EPSDT-related services, whether provided by the PCP or another provider.
- Documentation of a comprehensive screening must, at a minimum, contain a description of the components utilized.
- The medical record must indicate when a developmental delay was identified by the provider and an appropriate referral was made.

EPSDT service authorizations

In addition to the traditional review for medical necessity, service authorization requests for Medicaid members younger than 21 who do not meet Humana Healthy Horizons general coverage criteria are reviewed under EPSDT criteria for correcting or ameliorating the child's conditions. Service authorization requests for individuals younger than 21 cannot be denied, in part or in total, without completing an EPSDT secondary review. An adverse benefit determination on a service request for a child younger than 21 is not issued until the case is first reviewed by a provider who has appropriate expertise in addressing the child's medical, behavioral health or long-term services and supports needs. Providers can contact care coordinators or care managers to explore alternative services, therapies and resources for members. Any denial notice for noncovered, out-of-network and/or experimental services must explain that EPSDT criteria were applied and cite the reason the requested service did not meet EPSDT criteria. The notice indicates a secondary review was performed using the EPSDT-correct or ameliorate standard and explains how these standards were applied in the decision.

EPSDT medical necessity reviews

Humana Healthy Horizons determines whether a service is medically necessary for an individual child on a case-by-case basis, accounting for the particular needs of the child and consideration of applicable EPSDT criteria. Humana Healthy Horizons considers the child's long-term needs, not just what is required to address the immediate presenting problem, as well as other needs that include (but are not limited to) nutritional, social development, mental health and substance use disorders. Humana Healthy Horizons does not deny a child's service until an individualized secondary medical necessity review is completed.

EPSDT may provide other medically necessary healthcare, diagnostic services, treatment and measures, as needed, to correct or ameliorate defects and physical, mental and substance use disorders and conditions discovered or determined as necessary to maintain the child's current level of functioning or to prevent the child's medical condition from deteriorating. Depending on the severity, measures can include private duty nursing. Humana Healthy Horizons covers medical services (even if experimental or investigational) for children, per EPSDT coverage criteria, if it is determined the treatment or item would be effective to correct or ameliorate the child's condition. Humana Healthy Horizons provides coverage for medically necessary care and services under EPSDT, even if services are not available under the state's Medicaid plan for the rest of the Medicaid population.

For more information on EPSDT, visit [**Centers for Medicare & Medicaid Services \(CMS\) EPSDT**](#).

EPSDT referrals and treatment

Providers must make appropriate EPSDT referrals and document said referrals in the member's medical record.

Providers must promptly notify Humana Healthy Horizons if a screening for a member eligible for EPSDT services reveals the need for other healthcare services and the provider is unable to make an appropriate referral for those services. Humana Healthy Horizons can then secure an appropriate referral and contact the member to offer scheduling assistance and transportation for members lacking access to transportation.

If a provider identifies a developmental delay in a Humana Healthy Horizons member younger than age 3, appropriate referrals must be made to the Infant and Toddler Connection of Virginia for EIS and be documented in the member's records.