



BlueCross BlueShield
of North Carolina

HealthyBlue
Care Together

Early Periodic Screening Diagnosis Treatment Provider Training



Agenda

- Overview
- Goals
- Objectives
- Wrap Up — Q&A

Overview

Overview

This Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) training will provide you with the necessary knowledge and skills to deliver the high-quality services crucial for the early identification and intervention of health issues.



Goals

Goals

This training is designed to educate you and your staff about the EPSDT program under Medicaid.

Overall, this training aims to ensure that you are well-equipped to deliver the comprehensive, accessible, and effective healthcare services needed to improve the health outcomes and quality of life of Medicaid-enrolled children and adolescents.



Objectives

Objectives

The primary objectives of this training include:

1. Understanding EPSDT Requirements and Goals
2. Ensuring Comprehensive Health Screenings
 - a. Improving Diagnostic and Treatment Services
 - b. Promoting Preventive Care and Health Education
3. Navigating EPSDT Benefits and Services
4. Ensuring Cultural Competency and Sensitivity
5. Enhancing Coordination of Care
 - a. Advocacy and Support
 - b. Continuous Quality Improvement

Understanding EPSDT

Requirements and Goals

- Early Periodic Screening, Diagnosis, and Treatment (EPSDT) is Medicaid's federally mandated comprehensive and preventive child health program for individuals under the age of 21.
- EPSDT was defined by law as part of the Omnibus Budget Reconciliation Act of 1989 and requires states cover all services within the scope of the federal Medicaid program.
- The intent of the EPSDT program is to focus attention on early prevention and treatment.
- Services include screening, diagnosis, and treatment, and transportation and scheduling assistance.

Early

Periodic

Screening

Diagnosis

Treatment

Ensuring Comprehensive Health Screenings

Screenings must include:

- Comprehensive health and developmental assessment (physical and mental health development and history)
- Comprehensive physical exam
- Appropriate immunizations
- Laboratory tests
- Lead toxicity screening
- Health education, including anticipatory guidance
- Vision services
- Dental services
- Hearing services
- Other necessary care

Ensuring Comprehensive Health Screenings (cont.)

Service Scheduling Follows Guidance from the:

- American Academy of Pediatrics (AAP) Periodicity Schedule
- CDC Advisory Committee on Immunization Practices Immunization Recommendations Schedule

The EPSDT support program includes additional member outreach activities and case management, as well as a provider pre-service report.

Our Health Care Solutions program supports EPSDT by:

- Providing a repository to house EPSDT data
- Mailing annual preventive care recommendations to members
- Mailing reminders to members to make an appointment
- Mailing providers with a list of members who have missed services

Navigating EPSDT Benefits and Services

Wellness Visits

- A well-child visit should be scheduled for all new Healthy Blue Care Together members within 60 days. Subsequent visits should be scheduled based on the recommended guidelines:
 - 3 to 5 days
 - 1 month
 - 2 months
 - 4 months
 - 6 months
 - 9 months
 - 12 months
 - 15 months
 - 18 months
 - 24 months
 - 30 months
 - Annually starting at age 3 to 21 years
- Any member who has not had the recommended services should be brought up to date as soon as possible.
- All wellness visits should include, at a minimum, an unclothed physical exam, a developmental assessment, anticipatory guidance, and age-appropriate screenings and immunizations.

Navigating EPSDT Benefits and Services

Well Visits:

- A well visit should be scheduled for all new Healthy Blue Care Together members within [60 days]. Subsequent visits should be scheduled based on the recommended guidelines:

3 to 5 days	6 months	18 months
1 month	9 months	24 months
2 months	12 months	30 months
4 months	15 months	Annually from age 3 to 21 years

- Any member who has not had the recommended services should be brought up to date as soon as possible.
- All well visits should include, at a minimum, an unclothed physical exam, a developmental assessment, anticipatory guidance, and age-appropriate screenings and immunizations, as indicated.

Navigating EPSDT Benefits and Services (cont.)

- Health education should include:
 - Counseling for issues and risk factors.
 - Information about the benefits of a healthful lifestyle.
 - Safety practices/accident avoidance.
 - Disease prevention.
- Screenings are as recommended by AAP and AAPD.
 - An initial screening may be done at any time, even if the patient's age does not correspond with the periodicity schedule.
- If you are not receiving a monthly list of members who are past due, contact Provider Services at **[1-844-594-5072]**.

For complete information, visit:

- AAP Periodicity Schedule — [<https://aap.org/en/practice-management/periodicity-schedule>]
- American Academy of Pediatric Dentistry (AAPD) — [<https://aapd.org/CariesRiskAssessment>]

Ensuring Cultural Competency and Sensitivity

- Cultural Competency:
 - Recognize the impact of culture and cultural competency on health care.
- Clear Communication:
 - Demonstrate the importance of clear communication.
 - Be aware of potential barriers to communication and what your team can do.
 - Employ the effective use of interpreters.
- Disability Competency:
 - Understand laws and regulations.
 - Provide accommodations for patients with disabilities.
 - Recommend resources.
- Additional resources to support the delivery of culturally and linguistically appropriate services:
 - Follow the Culturally and Linguistically Appropriate Services (CLAS) standards.

Enhancing Coordination of Care

The Carolina ACCESS care management program is now the Advanced Medical Home (AMH) managed care program. This program model has an advanced focus on the following:

- Connecting members to the services and support they need through comprehensive assessment and needs identification.
- Local care management and care coordination.
- Connection to community programs and resources.

The AMH Vision:

- To build on the Carolina ACCESS program.
- To preserve broad access to primary care services for Medicaid enrollees.
- To strengthen the role of primary care in care management, care coordination, and quality improvement, as the state transitions to managed care.

- AMH practices will use multiple types of data from Prepaid Health Plans (PHPs) and other sources to carry out care management functions and assume responsibility for population health.
- Under managed care, PHPs will each track and maintain their own population health data and be responsible for sharing that data with AMH Practices.
- Required data flows from PHPs to all AMH:
 - Beneficiary assignment information
 - Initial care needs screening information
 - Risk scoring data
 - Common quality measure performance information

Continuous Quality Improvement

The AMH Program provides clear financial alignment for practices to be able to focus more on cost and quality outcomes over time by gradually aligning incentive payments for practices to specified quality and outcome measures.

There are five categories of quality measures for AMH:

1. Quality strategy objectives.
2. Total cost of care.
3. Key performance indicators.
4. Gaps in care — Compliance with age-appropriate mandatory preventive care screenings.
5. Other — To be developed in collaboration with NCDHHS and key stakeholders.

Wrap Up — Q&A

Thank you

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