

CHAPTER 84
EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT

[Prior to 7/1/83, Social Services [770] Ch 84]

[Prior to 2/11/87, Human Services[498]]

PREAMBLE

This chapter defines and structures the early and periodic screening, diagnosis and treatment services provided under the Medicaid program to eligible children under the age of 21. As further described in these rules, services include physical and mental health screenings (including hearing and vision), laboratory tests, immunizations, and health education. Services are provided in compliance with federal regulations at Title 42, Part 441, Subpart B, as amended to November 16, 1984.

441—84.1(249A) Definitions.

“*Diagnosis*” is the determination of the nature of physical or mental disease or abnormality.

“*Interperiodic screen*” means a screen that occurs between the times stated in the periodicity schedule in 441—subrule 78.18(3).

“*Screening*” is the use of quick, simple procedures to sort out apparently well persons from those who may have a disease or abnormality and to identify those in need of more definitive study. These services shall be provided in accordance with reasonable standards of medical and dental practice.

441—84.2(249A) Eligibility. All persons eligible for medical assistance under age 21 are eligible for early and periodic screening, diagnosis, and treatment.

441—84.3(249A) Screening services. Screening may be done by a screening center or other qualified providers. Other qualified providers are physicians, advanced registered nurse practitioners, rural health centers, federally qualified health centers, clinics, and dentists. Screening services shall include all of the following services:

84.3(1) A comprehensive health and developmental history including an assessment of both physical and mental health development. This includes:

- a. A developmental assessment.
- b. An assessment of nutritional status.

84.3(2) A comprehensive unclothed physical examination. This includes:

- a. Physical growth.
- b. A physical inspection including ear, nose, mouth, throat, teeth, and all organ systems such as pulmonary, cardiac, and gastrointestinal.

84.3(3) Appropriate immunizations according to age and health history as recommended through the vaccines for children program, except that “covered Part D drugs” as defined by 42 U.S.C. Section 1395w-102(e)(1)-(2) are not covered for any “Part D eligible individual” as defined in 42 U.S.C. Section 1395w-101(a)(3)(A), including an individual who is not enrolled in a Part D plan.

84.3(4) Health education including anticipatory guidance. See 441—subparagraph 78.18(6) “b”(1) for a description of the information services.

84.3(5) Hearing and vision screening.

84.3(6) Appropriate laboratory tests. These shall include:

- a. Hematocrit or hemoglobin.
- b. Rapid urine screening.
- c. Lead toxicity screening for all children aged 12 to 72 months.
- d. Tuberculin test, when appropriate.
- e. Hemoglobinopathy screening.
- f. Serology, when appropriate.

84.3(7) Direct dental referral for children over age 12 months.

441—84.4(249A) Referral.

84.4(1) The availability of early and periodic screening shall be discussed with the payee for any Medicaid-eligible child under the age of 21 at the time of application and periodically thereafter in compliance with federal regulations at Title 42, Part 441, Subpart B, as amended to November 16, 1984.

84.4(2) Screening shall be offered to each eligible individual according to the periodicity schedule in 441—subrule 78.18(3) when screening has been accepted, or on at least an annual basis when screening has been rejected. Interperiodic screens may be furnished when medically necessary to determine whether a child has a physical or mental illness or condition that may require further assessment, diagnosis, or treatment.

441—84.5(249A) Follow up. Follow-up services shall be provided when a referral for screening was accepted, but 60 days have elapsed and no screening examination has been performed, and when a screening examination discloses a possible abnormal condition and a referral was made for further diagnosis or treatment and such diagnosis or treatment has not been received within a period of 60 days from the date of the screening examination.

These rules are intended to implement Iowa Code section 249A.4.

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