

Follow-up Information from the Dept. of Public Health **Early Periodic Screening, Diagnosis & Treatment** *Preventive Health Services for Children*

Under a Memorandum of Agreement with the Iowa Department of Human Services (DHS), the Department of Public Health (DPH) works collaboratively with DHS and other state agencies, the Medicaid fiscal intermediary, managed care providers, community providers, families, and a network of community-based maternal and child health EPSDT Care Coordinators to improve access to quality Medicaid services for children. This collaborative effort began in 1987 when it was recognized that EPSDT was underutilized, with only 9.5 percent of Iowa's eligible children receiving services. System changes decrease barriers and assure availability of services. Today's participation rate is 98 percent.

The purpose of the DHS/DPH agreement is to:

1. Develop and maintain local capacity for conducting screening examinations required under the EPSDT program.
2. Increase program efficiency and effectiveness by assuring that needed services are provided in a timely and efficient manner.
3. Develop and maintain local capability for Maternal and Child Health (MCH) service and to provide Medicaid information and care coordination for clients.
4. Develop cooperative and collaborative relationships at all levels to prevent duplication of services.

The DPH provides the following services in accordance with the defined performance expectations:

1. Determine if local agencies requesting to be screening centers meet the recommended standards of existing medical practice established by the program.
2. Monitor the quality of care provided by existing Child Health Screening Center Providers through on-site evaluations and/or chart audits a minimum of every two years and other quality assurance activities.
3. Provide recommendations on enrollment requests in compliance with federal timelines.
4. Report to DHS agencies that no longer meet the qualifications to be screening centers.
5. Provide consultation and technical assistance in communities in assessing local needs for EPSDT Services.
6. Assure that screening services are available in all 99 counties in Iowa.
7. Assess dental access including consultation and program development with the Iowa Dental Association and its ten (10) dental districts.

The case management process, which began statewide in 1995, provides a comprehensive system of care coordination including outreach, informing, follow-up, and recall activities. Local contract MCH agencies receive specialized training in child health care coordination services. Each month EPSDT care coordinators call families newly enrolled

in Medicaid to inform them about the need for immunizations, dental visits, and periodic well child visits. Informing services provide a direct family encounter to assure that families understand the preventive health services program benefits and promote preventive health care within 60 days of determination of Medicaid eligibility. Care coordination services assist families of infants, children and youth to access services available under the EPSDT program. **Care coordinators partner with local physicians to ensure that children receive the comprehensive screening requirements of the program Department of Public Health staff provide technical assistance to community-based EPSDT care coordinators.** Technical assistance includes consultation in developing care coordination skills, determining the cost for informing and care coordination activities, utilizing computer support for the software program, and facilitating community meetings. Training workshops are held annually. A statewide toll-free Healthy Families Line coordinated with Iowa State University Extension links families with an EPSDT care coordinator who provides assistance with access to medical and dental care.

Policy and system changes have a positive impact on the ability of children and families to access EPSDT services. This past year, coordinated efforts resulted in increased utilization of EPSDT services in every eligible age group. According to the Department of Human Services most recent *Annual EPSDT Participation Report CMS-416* (10/01/02 through 9/30/03), the number of eligible children who received at least one EPSDT Screening Service during the year was an increase of 36,738 children over the previous year.