

Model Early and Periodic Screening, Diagnosis, and Treatment Services Act

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Model Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Services Act

Policy Statement

The Early and Periodic Screening, Diagnosis and Treatment program (EPSDT) was enacted by Congress in 1967 and was seen as a far reaching effort to provide comprehensive preventive health and treatment services to Medicaid eligible children under age 21.

Under the statute, the states were required to provide at least the following services:

- A comprehensive health and developmental history including an assessment of physical and mental health development
- Physical examinations
- Appropriate immunizations
- Laboratory tests
- Vision services
- Dental services
- Hearing services

OBRA '89 Modifications of the EPSDT Program.

The Omnibus Budget Reconciliation Act of 1989 (OBRA '89) codified existing regulations and made a number of changes to the 1967 statute.

Although the EPSDT program addresses the health care needs of Medicaid eligible children in general, OBRA '89 brought with it some modifications of particular significance to those in need of alcohol and other drug screening, counseling and treatment for themselves and their families.

These changes include the addition of health education to the list of required services and the definition of health education to include "anticipatory guidance". This latter change is discussed in "The Explanation of the Energy and Commerce and Ways and Means Committees Affecting Medicare-Medicaid Programs":¹

"The Committee emphasizes that anticipatory guidance to the child (or the child's parent or guardian) is a mandatory element of any adequate EPSDT assessment. Anticipatory guidance includes health education and counseling to both parents and children."²

This language may well be interpreted to allow for inclusion of drug counseling in the EPSDT program.

For those in need of alcohol and other drug screening and treatment services, an even more significant modification of the 1967 law calls for the addition to the EPSDT program of:

“Such other necessary health care, diagnostic services, treatment and other measures described in 1905 (a) to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not such services are covered under the State plan.”³

According to the Children's Defense Fund: this is “The most dramatic EPSDT change in OBRA '89 with great promise to improve the health of poor children”.⁴

Alcohol and Other Drug Abuse: Impact on Children and Adolescents.

The effects of alcohol and other drug abuse and addiction on children and young people have been well documented over the years. This impact can be drastic, interfering with educational and maturational development, causing damage to the individual, to the family and to the greater society. The toll of alcohol and other drug abuse on children and young people includes: learning impairments, truancy, high drop-out rates, unwanted teen pregnancy, school vandalism, crime, car accidents, death on the highways and suicide.

The importance to families and to society of addressing alcohol and other drug problems at this young age is impossible to overstate. Intervention early in the abuse cycle will prevent permanent damage to health, family and to educational and career goals.

With this in mind, the EPSDT program presents an important opportunity for states to augment screening and treatment efforts geared to this age group. Through EPSDT, federal matching monies can be marshalled to address the needs of these high risk young people.

Summary: The Opportunity.

Modifications made to the Early and Periodic, Screening, Diagnosis and Treatment program by OBRA '89 present an opportunity to include alcohol and other drug abuse and addiction screening and treatment in this federally matched health effort targeted to children under 21.

Encouraging states to include these alcohol and other drug services as part of the implementation of the federal program will assist states in reaching positive preventive health goals for Medicaid eligible children while at the same time, maximizing the use of federal resources.

As with adults, alcohol and other drug abuse and addiction leads to high utilization of health care and increases criminal activity. Routine screening and treatment of alcohol and other drug problems with young people can be expected to reduce health care costs and alcohol and other drug-related crime.

ENDNOTES

1. Commerce Clearing House, Inc., EXPLANATION OF THE ENERGY AND COMMERCE AND WAYS AND MEANS COMMITTEES AFFECTING MEDICARE-MEDICAID PROGRAMS, Omnibus Budget Reconciliation Act of 1989, H.R. 3299, No. 596, page 399 (October 5, 1989).
2. 163 HEALTH ADVOCATE 4 (Winter 1990).
3. 42 U.S.C. 1396d(r)(5).
4. Children's Defense Fund, MEDICAID PREVENTIVE SERVICES FOR CHILDREN - THE EPSDT PROGRAM, Analysis of 1989 Federal Legislation (January 1990).

Model Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Services Act

(Amendment to State Welfare Code)

Section 1. Short Title.

The provisions of this [Act] shall be known and may be cited as the “Model Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services Act”.

Section 2. Inclusion of Treatment in EPSDT Programs.

For the purposes of state implementation of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services program, all alcohol and other drug abuse screening, counseling and treatment services other than those provided in an Institution for Mental Disease, shall be included.

Section 3. Non-Supplantation.

Funding provided through the EPSDT services program shall not be used to supplant other state or federal resources.

Section 4. Liberal Construction.

The provisions of this [Act] shall be liberally construed to effectuate the purposes, objectives, and policies set forth in Sections 2 and 3.

Section 5. Severability.

If any provisions of this [Act] or application thereof to any person or circumstance is held invalid, the invalidity does not affect other provisions or applications of the [Act] which can be given effect without the invalid provisions or application, and to this end the provisions of this [Act] are severable.

Section 6. Effective Date.

This [Act] shall be effective on [reference to normal state method of determination of the effective date][reference to specific date].

COMMENT

Under the provisions of this program, the state can enhance its ability to provide alcohol and other drug abuse and addiction screening and treatment for Medicaid eligible children under the age of 21.

Federal financial participation is available for screening and for outpatient and inpatient treatment services except for those provided in an Institution for Mental Disease with 16 or more beds.

Appendix E

Bibliography

Children's Defense Fund, *Improving the Health of Medicaid-Eligible Children*, CDF REPORTS 1,8 (April 1990).

Children's Defense Fund, MEDICAID PREVENTIVE SERVICES FOR CHILDREN - THE EPSDT PROGRAM, Analysis of 1989 Federal Legislation (January 1990).

Children's Defense Fund, NEW OPPORTUNITIES FOR PREVENTIVE HEALTH CARE FOR POOR CHILDREN: MEDICAID'S EPSDT PROGRAM AFTER 1989 FEDERAL LEGISLATION - QUESTION AND ANSWERS (February 1990).

Commerce Clearing House, Inc., EXPLANATION OF THE ENERGY AND COMMERCE AND WAYS AND MEANS COMMITTEES AFFECTING MEDICARE-MEDICAID PROGRAMS, Omnibus Budget Reconciliation Act of 1989, H.R. 3299 (No. 596, October 5, 1989).

Commerce Clearing House, Inc., SUMMARY AND TEXT OF THE LAW AFFECTING MEDICARE-MEDICAID PROGRAMS, Omnibus Budget Reconciliation Act of 1989, H.R. 3299 (No. 603, December 15, 1989).

Early and Periodic Screening, Diagnostic, and Treatment Services Defined, Omnibus Budget Reconciliation Act, H.R. 3299, §6403.

English, A., EPSDT:A MODEL FOR IMPROVING ADOLESCENTS' ACCESS TO HEALTH CARE (National Center for Youth Law, Children's Defense Fund, December 1992).

George Washington University, EPSDT AND INCREASED HEALTH CARE FOR LOW-INCOME CHILDREN: PROSPECTS AND PROBLEMS FOR THE STATES, Workshop Materials (February 28, 1990).

163 HEALTH ADVOCATE 4 (Winter 1990).

Health Care Financing Administration (HCFA), U.S. Department of Health and Human Services, FACT SHEET:MEDICAID'S CHILD HEALTH PROGRAM (July 1992).

Health Care Financing Administration (HCFA), U.S. Department of Health and Human Services, STATE MEDICAID MANUAL, PART 5 - EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT (Pub. 45-5, April 1990).

Office for Substance Abuse Prevention, Demonstration Grants for the Prevention of Alcohol and other Drug Abuse Among High Risk Youth Program Announcement (PA-91-31 March 1, 1991).

Omnibus Budget Reconciliation Act of 1989, 42 U.S.C. §1396(d)(r).

Svikis, D., *Children of Alcoholics: A Target for Prevention Efforts*, in ALCOHOLISM AND CHEMICAL DEPENDENCY IN THE WORKPLACE 301-310 (Wright, C., ed. 1989).