



## DISABILITY RIGHTS CENTER - NH

64 N. Main St., Suite 2, Concord, NH 03301-4913 • advocacy@drcnh.org • drcnh.org  
(603) 228-0432 • (800) 834-1721 voice or TTY • FAX: (603) 225-2077

### Medicaid's Special Coverage for Children and Young Adults

By Karen Rosenberg, Staff Attorney, Disability Rights Center - NH

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Regular screening, proper diagnosis, and timely treatment are essential components of quality healthcare. For all Medicaid-eligible individuals under age twenty-one, federal Medicaid law requires states to provide Early and Periodic Screening, Diagnosis, and Treatment (EPSDT). States like New Hampshire that contract with managed care organizations (MCO) to provide health insurance for Medicaid recipients must ensure that the MCO's coverage complies with federal EPSDT's requirements.

Under EPSDT, states must assess children's health needs to ensure health problems are diagnosed and treated before they become more serious or complex. States are required to adopt a schedule for medical screenings and developmental assessments. New Hampshire follows the American Academy of Pediatrics schedule for pediatric care; this calls for screenings and checkups to begin right after birth and to continue on a frequent basis as children develop.

Medicaid eligible individuals under the age of twenty-one are entitled to a broad range of screenings including: 1) health and developmental history, 2) complete physical exams, 3) immunizations, 4) lab tests, and 5) vision, hearing, and dental exams. States must take affirmative steps to encourage and assist Medicaid eligible children to have medical screenings. This includes informing parents about the importance of early screenings for their children and providing assistance with scheduling and transportation. **If a physical or mental illness or condition is identified, the child must receive diagnostic tests and necessary medical treatment, even if the condition is identified outside of a regularly scheduled screening.**

EPSDT require states to cover medical services when necessary "to correct or ameliorate" physical and mental illnesses and conditions<sup>1</sup>. Unlike the adult Medicaid program, EPSDT requires coverage of *all* medically necessary services that could be covered under federal Medicaid law. For example, even though New Hampshire's Medicaid Plan for adults does not cover most dental services, under EPSDT, children and young adults under 21 must have access to a broad range of dental treatment including regular examinations, x-rays, topical fluoride, dental sealants, and treating cavities. A wide variety of medically necessary services must be covered. Among these are: "preventive services" which are "services recommended by a physician or other licensed practitioner to (1) prevent disease, disability, and other health conditions or their progression . . . and (3) promote physical and mental health and efficiency" and "rehabilitative services" which include "any medical or remedial services recommended by a physician . . . for maximum reduction of physical or mental disability and restoration . . . to his (or her) best functional level."<sup>2</sup>

In addition, under EPSDT states cannot limit the amount, duration, and scope of medically necessary services for children, even if the state's Medicaid plan for adults includes such limits. For example, New Hampshire's Medicaid plan for adults caps coverage of occupational therapy (OT), physical therapy (PT) and speech

<sup>1</sup> 42 U.S.C. §1396d(r)(5)

<sup>2</sup> 42 CFR §440.130(c),(d)

therapy (ST) services. Under EPSDT, Medicaid-eligible children and young adults are entitled to receive as many OT, PT, and ST services as are medically necessary.

There are some limits on medical services that must be covered under EPSDT. States may place tentative limits on the amount, scope, or duration of services for individuals under twenty-one years of age, provided that there is a process to allow for coverage beyond the limit, if medically necessary. In addition, states may require prior authorization for certain types of services, as long as the prior authorization process does not delay delivery of necessary medical care. States may choose to cover a service in the most economic manner, as long as the alternative method proposed is equally effective as the service recommended by the treating physician. Finally, states do not have to cover treatment that is unsafe or experimental.

Despite the strong provisions of federal EPSDT law to protect children's health, states do not always comply with the letter of the law. Medicaid agencies may attempt to cut back, limit access, or deny access to particular healthcare services for children and youth. Medicaid recipients have a right to appeal any denials, limits, or termination of treatment that they believe is medically necessary. Appeals may be filed with the New Hampshire Department of Health and Human Services' Administrative Appeals Unit (AAU). For more information on appeals to the AAU see "*Fair Hearing Rights Under Medicaid*," <http://www.drcnh.org/medicaidhearings.htm>

If the service coverage dispute is with a MCO, the first step is to follow the MCO appeal process. For more information on how to contest a medical service denial or termination from a MCO, see "*Know Your Rights: New Hampshire Medicaid Managed Care Health Plans - Your Right to Appeal or File a Grievance*," available at [www.drcnh.org/MMCappealsgrievances.html](http://www.drcnh.org/MMCappealsgrievances.html). If you are not satisfied with the result of the MCO appeal, you may request a fair hearing before an impartial hearing officer at the AAU.

If you have specific questions or concerns regarding Medicaid/EPSDT-covered services, feel free to contact the Disability Rights Center – NH to schedule an appointment with one of our intake attorneys.