

# Core Component #18 Pediatric PCP Area of Concentration •

Schedule office visits for children/youth in the foster care system/CMDP on an enhanced EPSDT schedule

## **Key Concepts**

- The Comprehensive Medical and Dental Program (CMDP) is the health plan responsible for ensuring, in partnership with foster care providers, the provision of appropriate and quality health care services for the well-being of Arizona's children in **foster care.**
- For the Targeted Investments participants, the milestone calls for providers to deliver an enhanced schedule for children in the CMDP program.
- TI requires participants to use the enhanced EPSDT screening for their patients in foster care.



# EPSDT Screenings for Children on CMDP

- EPSDT Screenings for children on CMDP:
  - 1)Monthly for infants birth to 6 months (including at 3 and 5 months)
  - 2) Every three months for children between 6–24 months (including at 21 months)
  - 3) **Bi-annually** for children/youth 24 months up to 21 years of age

To meet this Core Component, participants will focus on CMDP patients **from ages 0 up to 21.** 



## EDSPT Visit Schedule- CMDP

- 1. Newborn
- 2. 3-5 days (extends to week 1 of life)
- 3. 1 months
- 4. 2 months
- 5. 3 months\*
- 6. 4 months
- 7. 5 months\*
- 8. 6 months

- 9. 9 months
- 10. 12 months
- 11. 15 months
- 12. 18 months
- 13. 21 months\*
- 14. 24 months
- 15. Yearly beginning at age 3



<sup>\*</sup>additional visits for enhanced schedule compared to schedule for non CMDP kids

## **EDSPT Visit Schedule-Non CMDP**

- 1. Newborn
- 2. 3-5 days (extends to week 1 of life)
- 3. 1 month
- 4. 2 months
- 5. 4 months
- 6. 6 months
- 7. 9 months

- 8. 12 month
- 9. 15 months
- 10. 18 months
- 11. 24 months
- 12. Yearly beginning at age 3



## Review of Core Component #18

Practices that provide primary care must schedule office visits for children/youth in the child welfare system on the following enhanced EPSDT schedule:

1) Monthly for infants birth to 6 months,

Every three months for children between 6–24 months,

3) B! amually for children/youth 24 months to 21 years of age.

Milestone Measurement Period 1 (October 1, 2017–September 30, 2018\*\*)

**Practice Reporting Requirement to State** 

By September 30, 2018 ,document policies and procedures to schedule and perform additional EPSDT visits consistent with the exhanced periodicity schedule.

Milestone Measurement Period 2 (October 1, 2018–September 30, 2019\*\*)



Practice Reporting Requirement to State

Document that the practice measures gaps in well-care visits for children/youth in the child welfare system based on the enhanced EPSDT periodicity schedule.



## Core Component #18

Practices that provide primary care must schedule office visits for children/youth in the foster care system on the following *enhanced* EPSDT schedule:

- 1) Monthly for infants birth to 6 months,
- 2) Every three months for children between 6–24 months,
- 3) **Bi-annually** for children 24 months up to 21 years of age.



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# TI Year 2 Measurement Period October 1,2017-September 30, 2018

### **Practice Reporting Requirement to State:**

### **By September 30, 2018:**

 Document policies and procedures to schedule and perform additional EPSDT visits consistent with the enhanced periodicity schedule.



### Attestation and Document Validation

- AHCCCS will be opening a TI Attestation Portal through AHCCCS Online (https://azweb.statemedicaid.us/Account/Login.aspx?ReturnUrl=%2f)
- The portal will be available for milestone attestation in June 2018.
- Not all of the Milestones will require providers to upload documentation through the Attestation Portal for review by AHCCCS.
- In order to attest to meeting this Core Component, participants will need to document policies and procedures to schedule and perform additional EPSDT visits consistent with the enhanced periodicity schedule.
- More detailed information and guidance about how to use the TI Attestation Portal will be available prior to June 2018.



# Sneak Peek of Targeted Investments Year 3



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# TI Year 3 Measurement Period October 1, 2018-September 30, 2019

- 18. Practices that provide primary care must schedule office visits for children/youth in the child welfare system on the following enhanced EPSDT schedule:
  - 1) Monthly for infants birth to 6 months,
  - 2) Every three months for children between 6-24 months,
  - 3) Bi-annually for children/youth 24 months to 21 years of age.

#### Milestone Measurement Period 1

(October 1, 2017-September 30, 2018\*\*)



### **Practice Reporting Requirement to State**

By September 30, 2018 ,document policies and procedures to schedule and perform additional EPSDT visits consistent with the enhanced periodicity schedule.

#### Milestone Measurement Period 2

(October 1, 2018–September 30, 2019\*\*)



### Practice Reporting Requirement to State

Document that the practice measures gaps in well-care visits for children/youth in the child welfare system based on the enhanced EPSDT periodicity schedule.



# Sneak Peek: Milestone Measurement Period 2 –October 1, 2018-September 30, 2019

# Practice Reporting Requirement to State by 9/30/2019

Based on a random sample of 20 members, attest that:

A. Document that the practice measures gaps in well-care visits for children/youth in the foster care system based on the enhanced EPSDT periodicity schedule.



# Questions?

Please contact us at <a href="mailto:targetedinvestments@azahcccs.gov">targetedinvestments@azahcccs.gov</a>

if you have any questions



8/7/2018

# Thank You.



