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*Interperiodic*

Region X  
M/S \_\_\_\_\_  
2201 Sixth Avenue  
Seattle, WA 98121

TITLE XIX STATE AGENCY LETTER NUMBER 91-33

**Subject:** Clarification of Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Provisions, Section 6403 of Omnibus Budget Reconciliation Act of 1989 (OBRA 89)

A question was raised concerning the phrase "conditions discovered by the screening services" in Section 6403 of OBRA 89 in regards to EPSDT, and its application in determining whether States are permitted to exclude preexisting chronic conditions, which have or have not increased in severity, from necessary follow-up services. Does discovered during a screen mean that a condition was first found to exist during the screen?

OBRA 89, in addition to requiring all diagnostic and treatment services as a required component of EPSDT, also requires that screening services be provided on both a periodic and interperiodic basis. ~~The nature of the interperiodic services is discussed in the report of the House Committee on Budget. In its deliberations on interperiodic screens, that Committee indicates:~~

The Committee bill also requires States to provide screening services at intervals other than those identified in their basic periodicity schedule, when there are indications that it is medically necessary to determine whether a child has a physical or mental illness or condition that may requires further assessment, diagnosis, or treatment. These interperiodic screening examinations may occur in children whose physical, mental or developmental illnesses or conditions have already been diagnosed, if there are indications that the illness or condition may have become more severe or has changed sufficiently, so that further examination is medically necessary. (Emphasis added.)

Both sentences describing congressional intent about interperiodic screens discuss the need to provide further services or services for conditions already existing. Clearly Congress anticipated that children with already existing health problems would have available diagnostic and treatment services appropriate to their needs. To view this legislation otherwise, is contrary to the preventive thrust of the program and the concept historically embodied in the EPSDT program to diagnose and treat health problems early before they worsen and become more

In addition, in order for a child's health problems to be known, the child had to have received screening services at some point in time. For example, a child is seen by a physician and is diagnosed as having some condition. Two months later the mother takes the child for the scheduled "EPSDT screen" and tells the screener the child was already diagnosed as having a specific health problem. In this example, we interpret the initial encounter with the physician to be an inter-periodic screening service in which the health problem was discovered. ~~Furthermore, we consider any encounter with a health care practitioner within the scope of practice as an interperiodic screen.~~ As such, it does not matter whether the child receives the screening services while Medicaid eligible, nor whether the provider is participating in the Medicaid program at the time those screening services are furnished. Any, necessary health care required to treat conditions detected as a result of a screen must be provided.

If you have any questions please contact Helen Phillips, Policy Specialist, at (206) 553-0445.



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