

Division of Medicaid	New:	Date:
State of Mississippi	Revised: X	Date: 08/01/05
Provider Policy Manual	Current:	
Section: EPSDT	Section: 73.06	
	Pages: 3	
Subject: Off Site Screenings	Cross Reference:	

Off-site screenings are defined as screenings that are provided off-site from the medical facility, which is defined as and limited to hospitals, physician offices, Public Health clinics, and Federal/State certified clinics and certain designated public schools. Each clinic site must have its own facility Medicaid number and be approved with an on-site survey by the DOM EPSDT Nurse prior to actual screening activities.

“Provider” is defined as a clinic provider such as a county public health clinic, Federally Qualified Health Center (FQHC), rural health clinic, community health clinic and certain designated public schools. Medical personnel performing the physical examination must be physicians, certified nurse practitioners or physician assistants employed by the facilities and must submit claims under their own individual or group Mississippi Medicaid Provider number.

Registered nurses who are employed through the Mississippi Department of Education (MDE), who have met the certification requirement, and who meet the established protocol mandated by the Mississippi State Department of Health (MSDH), MDE, Mississippi School Nurse Association, and Mississippi Board of Nursing may perform EPSDT health assessments following the protocols established by the MSDH. Those nurse-run clinics sponsored by medical practices/hospitals and issued provider numbers prior to 2002 will be recognized as acceptable if they conform to the above. However, after 2002, all established and new nurse-run clinics must adhere to the above stated policy. This process assures that registered nurses have the educational basis and clinical basis needed to perform health assessments. In addition to the certification requirement, claims submitted for these services must be submitted under the school's provider number, and the billing provider must have a letter of referral affiliation on file with the Division of Medicaid.

The primary care referral list of the providers in the county in which registered nurses render services must include pediatricians, family and general practice physicians, internal medicine physicians, vision and hearing providers and dentists (i.e., provider confirms in writing to accept referrals).

The provider must submit the following information to Medicaid for approval: child abuse and confidentiality polices; signed statement of responsibilities between the off-site agency and the provider agency; and information packet materials, including letters, forms and examples of anticipatory guidance information sheets to be used. Any changes to these forms by the provider must be prior approved by Medicaid.

A list of all physical locations at which EPSDT screenings are available will be provided. A separate provider/facility number will be assigned to each off-site location. A separate application, provider agreement and on-site visit are required for each off-site location before screenings can be done.

Eligibility for screening services

Any student and/or child under 21 years of age may access EPSDT screening services with a signed parental consent for services. However, Medicaid eligibility cannot be required in order for a child to access the off-site screening program. When a parent or guardian identifies on the Health Services Information sheet that there are siblings who need the health checkup, the EPSDT provider will contact the parent/guardian to schedule a time and place for the screening of these siblings.

Medical Records Management

The EPSDT screening provider is responsible for the creation and maintenance of the medical records. The medical records must be securely housed in a medical office to maintain appropriate record confidentiality and must be accessible during normal working hours. A fax and a phone must be available. Accessibility by walk-ins is also desirable. The location must be convenient to parents or other

providers. The EPSDT screening provider must submit for Medicaid's approval a designated location for the medical record storage so the EPSDT auditors can access them as necessary. All medical record forms must be approved by Medicaid.

Confidentiality

The EPSDT screening provider must develop and adhere to confidentiality policies set by the Division of Medicaid and the off-site location. All policies, rules and regulations must adhere to HIPAA guidelines. Release of information may only take place if parental consent has been given. Children must have written consent from their parent/guardian before participating in the screening program. The parent/guardian should be encouraged to be present during the screening. However, the level of parental involvement should be a joint decision made by the EPSDT screening providers and off-site location.

Once the health screening is complete, the parent/ guardian must be informed of the results of the screening by mail or face to face. The anticipatory guidance materials must be age appropriate, and the material may be given to children 14 years of age and above.

Refer to the post screening information listed below.

Information Packets

All medical forms containing information regarding EPSDT screenings that are distributed by the provider must be prior approved by the DOM EPSDT Program and the off-site provider.

Information	Pre-Screening	Post-Screening
Cover Letter	Letter explaining the packet	Parent follow-up letter
Health services info sheet	Authorization for services	Appropriate Referral Form
	Student Medical history form	Anticipatory guidance

- The pre-screening packet should be sent to interested parents/guardians. Each item in the pre-screening packet must be completed by the parent/guardian and returned to the off-site location. If forms are not completed or are unclear, the EPSDT provider must contact the parent/guardian for clarification before performing the screening.
- Post-screening: If the parent/guardian is not present during the screening, the EPSDT provider will be responsible for sending the post-screening packets to the parent/guardian. The post-screening packet must include contacting parents by telephone or mail, arranging appropriate parent consultation visits and referring eligible children for follow-up.

Results of the screening tests and procedures should be noted in the medical record when results are determined and appropriate action taken. Abnormal conditions must be documented in the medical history or physical exam portion of the medical record if a referral is necessary. Notation of the condition on the EPSDT referral form alone will not be considered sufficient documentation. Medicaid may recoup the fee for screening service from the referring provider when a referral is made for a condition not documented in the medical history or physical exam portion of the medical record.

Referrals/ Follow-up:

No follow-up is needed in cases where no abnormality or disability is indicated; the nurse will inform the parent/guardian of such by telephone or mail and inform them when the next screening exam is needed.

Additional follow-up is needed in identified cases where problems are indicated; the screening provider will discuss with the parent/guardian and make appropriate referral for diagnosis. The parent/guardian must be given the freedom of choice to choose a treatment provider. Children can be referred to the provider of choice or by the provider's primary care referral list.

In accordance with Mississippi Law Regarding Reporting of Suspected Child Abuse or Neglect, providers are required to report any suspected or documented child abuse or neglect.