What is Health Tracks/EPSDT?

Health Tracks/EPSDT is a Medicaid benefit designed so children get the health care they need when they need it – "the right care to the right child at the right time in the right setting." North Dakota's EPSDT program is called Health Tracks.

Who is eligible to receive Health Tracks/EPSDT benefits?

All Medicaid-eligible children under the age of 21 can receive Health Tracks/EPSDT benefits.

What kind of benefits are available under Health Tracks/EPSDT?

Health Tracks/EPSDT focuses on screening children regularly (periodically) to:

- make sure their development is on track;
- diagnose developmental, mental health, or other health conditions; and
- supply the right treatment and follow up for those conditions.

Health Tracks/EPSDT eligible recipients are entitled to medically necessary care to **correct or ameliorate** defects and physical and mental illness and conditions ... **whether or not such services are covered under the state Medicaid plan**. This care includes preventative measures, plus dental, vision, and hearing services.

What does "medically necessary" mean?

Medically necessary in North Dakota means:

Medical or corrective services or supplies needed to treat illness, injury, or impairment:

- Consistent with the recipient's diagnosis or symptoms;
- Appropriate according to generally accepted medical practice;
- Appropriate in scope, length, intensity, and site of treatment; and
- Provided at the right level of service that is safe and effective.

Medically necessary does not include:

- Experimental, investigational, or unproven treatments; and
- Care or supplies provided as a convenience to the recipient or provider.

North Dakota Administrative Code 75-02-02-03.2(10)

My child should qualify for Health Tracks/EPSDT Medically Necessary care. What do I do to receive it?

First, make sure your child is receiving care from an enrolled Medical Provider. Tell your provider you are seeking care, treatment, supplies, and/or services as "medically necessary" under the Health Tracks/EPSDT program.

Next, ask your child's medical provider to write you a letter of medical necessity to support the claim. Make sure the letter has the following information:

- 1. All relevant patient diagnoses described in detail –whether it is an illness, condition, injury, or disability.
- 2. The patient's prognosis what will happen to the patient due to this diagnosis without treatment? i.e., how the condition will worsen, how the treatment will prevent further illness, injury, secondary disability, etc.
- 3. Descriptions of the recommended services, treatment, and/or items with explanations as to why those things are medically necessary (based on best available medical evidence, "gold standard") and the goal(s) of the recommendations (to fix deficits, signs, and symptoms of the treated condition). This includes **reduction**, **correction**, **or amelioration** (use this terminology in the letter) of the physical, mental, developmental, or behavioral effects of an illness, condition, injury, or disability.
- 4. Descriptions of the benefits to the patient from the recommended services, treatment, items related to their diagnosis(es). If applicable, describe how the services, treatment, or items will help the patient get or keep sufficient functional ability to perform age-appropriate or developmentally appropriate daily activities.
- 5. Descriptions of exactly what and how much is necessary. Describe the frequency, intensity, and duration of treatment (how many treatments and how often, how long treatments should continue, right dosages, etc.)
- 6. If there is any chance that the treatment appears to be convenience-related, include a statement saying the treatment is primarily for the care of

the child (and reasons supporting that) and not for the convenience of the family or caregiver. *Make sure the letter does not have statements that refer to convenience or ease for the patient or caregivers.

- 7. It may be necessary for the medical necessity letter to state that other treatments for the diagnosis have failed and then describe the earlier treatment, its failure, and the need for the recommended treatment using the above information.
- 8. Personal Care Medical Necessity Letters for Recipients with Developmental Disabilities or Intellectual Disabilities:
 - a. The recipient's ability to perform age-appropriate care is impaired
 - i. Describe what cares are impaired and how they are impaired
 - ii. Indicate what personal care is necessary plus how often, how long, etc. it is needed
 - iii. Describe the benefits to prevent regression of activities of daily living skills, improvement, etc.

b. Personal care when a parent is absent. The recipient's need for care must be "medically" necessary. Do not reference "respite care" or the convenience of caregivers. The letter can say the parent is unable or unavailable to properly care for the child due to working, sleeping, or demands of caring for other children in the house, etc.

These standards apply to all desired EPSDT covered needs – physical, mental, and/or behavioral health. It is important that the medical professional fully describes the diagnosis, prognosis, treatment plan, description of benefits from recommended treatment including the words "correct and ameliorate", prescription of treatment (frequency, duration, intensity), and that treatment is being prescribed primarily for the patient.

By including this detailed information in an EPSDT medical necessity letter, you can use EPSDT to get more frequent therapies, medications not on the "approved" list, greater quantities or different brands of supplies, more private duty nursing care hours, and other needs. North Dakota must provide the "amount, duration, and scope" of the treatment or service "to reasonably achieve the purpose" of that service. <u>42 C.F.R.</u> §440.230.

What to do if your Health Tracks/EPSDT benefit request is denied.

Make sure there is a <u>written</u> denial with a factual and legal basis for action, explaining a recipient's right to appeal and to continue benefits pending the appeal;

- 1. Ask whether there is an option to request a peer-to-peer review by a medical person with a specialty background relating to the recipient's diagnoses in question;
- 2. Examine appeal options, including administrative appeal; and
- 3. *Be aware of all relevant appeal timelines. Note deadlines and do not miss them or you may lose your right to appeal a denial.

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