



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

Volume 10 No. 64

August 2000

TO: Physicians, Nurse Practitioners, Clinical Nurse Specialists, Independent Clinics, Federally Qualified Health Centers, Hospital Outpatient Departments - **For Action**
Health Maintenance Organizations - **For Information Only**

SUBJECT: **EPSDT Incentive Payments**

EFFECTIVE: EPSDT screening examinations provided on or after September 1, 2000

PURPOSE: To notify Medicaid fee-for-service (FFS) providers of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) screening examinations of an incentive payment to encourage physicians to report examinations to the FFS program.

BACKGROUND: The New Jersey Division of Medical Assistance and Health Services (DMAHS) requires that all FFS Medicaid beneficiaries under 21 years of age receive EPSDT screening examinations. The goal of EPSDT is to ensure that each eligible individual receives appropriate preventive care and that any defects are identified, diagnosed and treated at the earliest age possible.

A key element of EPSDT is the periodic screening examination that includes the following:

- a comprehensive health and development history, including assessment of both physical and mental health development;
- a comprehensive unclothed physician examination;

Vision and hearing for children between the newborn period and 3 years is accomplished through a subjective assessment, i.e., history and observation; standard testing must be used for older children.

- appropriate immunizations according to age and health history;
- laboratory tests, including blood lead level assessment appropriate to age and risk;

Blood tests for lead must be done at 12 and 24 months and between 36 and 72 months of age if such testing has not been performed earlier. For further details concerning lead screening, please see the Medicaid Newsletter, Volume 10, No. 57, dated July 2000.

- health education, including anticipatory guidance;

- all children 3 years of age or older must be referred to a dental provider.
- any correctable abnormality uncovered or suspected should be referred for diagnosis and treatment. The referral may be to the screening provider, if appropriate.

Annually, the State must report to the federal government participation of eligible individuals in EPSDT, i.e., those individuals who have received EPSDT screening examinations. The Division believes individuals under 21-years of age receive more screening examinations than are actually reported. Many physicians do not report or inappropriately report these examinations to the Medicaid FFS program. As a result, EPSDT statistics reported to the federal government are being understated suggesting a lower quality of care for Medicaid beneficiaries under 21 years of age.

In order to encourage physicians to report EPSDT screening examinations, DMAHS is providing an incentive payment for each documented EPSDT screening examination reported on claims submitted to the Medicaid FFS program. Incentive payments for children enrolled in managed care plan will be addressed under separate cover.

ACTION: Effective for EPSDT screening examinations provided on or after September 1, 2000, physicians are eligible to receive a \$10.00 incentive payment for each documented examination reported on the MC-19 claim form (*Form MC-19 Report and Claim for EPSDT/HealthStart Screening and Related Procedures*).

Physicians must report the HCPCS procedure code W9828 (*Incentive Payment*), **in addition** to the appropriate EPSDT/HealthStart HCPCS procedure code on the MC-19 claim form. The incentive payment will be reimbursed each time an appropriate EPSDT/HealthStart HCPCS procedure code is reported on the MC-19 claim form. For your information, please find attached a copy of the MC-19 claim form and billing instructions for its completion.

EPSDT/HealthStart HCPCS procedure codes include the following:

EPSDT	AGE	HEALTHSTART
W9060 WT	Under 6 weeks	W9060
W9061 WT	2 months	W9061
W9062 WT	4 months	W9062
W9063 WT	6 months	W9063
W9064 WT	9 months	W9064
W9065 WT	12 months	W9065
W9066 WT	15 months	W9066
W9067 WT	18 months	W9067
W9068 WT	24 months	W9068
W9820	Annually to 20 years	None

If you have any questions concerning this Newsletter, please do not hesitate to contact Danuta Buzdygan, M.D., Chief, Pediatric Consultant, at (609) 588-2718.

**RETAIN THIS NEWSLETTER NUMERICALLY BEHIND THE NEWSLETTER TAB
(BLUE TAB MARKED "5")
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**