

Health Care Practice Tip February 2019

EPSDT Medical Necessity Standard for Children Under 21 (SB 1287 Implementation)

The National Health Law Program and Western Center on Law and Poverty sponsored SB 1287 (Hernandez), Chapter 855 in 2018, which codified in state statute the federal Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) standards for Medi-Cal services applied to children under age 21 to ensure the correct medical necessity standard is used for children.

The federal EPSDT standard requires that children under age 21 receive services that are medically necessary to correct or ameliorate any physical or mental illness or condition. Prior to SB 1287, state Medi-Cal law defined "medically necessity" as when it is reasonable and necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain. This narrow definition and application, which required providers to explicitly request broader EPSDT standard be applied, resulted in children being denied access to the dental, health, and mental health services they are entitled to.

The bill, specifically Welfare and Institutions Code 14059.5(b)(2), requires the Department to update evidence of coverage documents, beneficiary handbooks, and related material to ensure the correct medical necessity standard is applied for children under age 21. In the longer term, the bill also requires the department to revise or adopt regulations in accordance with the Administrative Procedure Act by July 1, 2022. This includes revising Title 22 and Title 9 California Code of Regulations to eliminate all references to EPSDT- Supplemental Services and revising regulations that impose a more restrictive medical necessity standard than federal EPSDT.

Although the Department has increased the amount of EPSDT information available on the DHCS website and is working on updating the beneficiary handbook and provider manual, confusion among providers, health plans, and county mental health plans remain. The department has not issued new guidance letter to providers, health plans, and county mental health plans instructing them to utilize the federal standard in all instances where Medi-Cal covered services are requested for any child or youth under age 21.

If you hear of children being denied services because the magic EPSDT words were not used or due to a narrow application of medical necessity, please contact Kim Lewis at lewis@healthlaw.org and Linda Nguy at lnguy@wclp.org to elevate this issue.