

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>4-16-10</i>
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<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
1. LOG NUMBER <i>301423</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Ms. Forkner Deps, CMS file</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>4-27-10</i> DATE DUE _____
<i>cleared 5/7/10, action</i>	<input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

Department of Health & Human Services  
Centers for Medicare & Medicaid Services  
61 Forsyth St., SW, Suite 4T20  
Atlanta, Georgia 30303-8909



April 9, 2010

Emma Forkner, Director  
South Carolina Department of Health and Human Services  
P.O. Box 8306  
Columbia, SC 29202-8206

**RECEIVED**  
APR 16 2010  
Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Ms. Forkner:

I am writing to you in reference to South Carolina's Early and Periodic Screening, Diagnostic and Treatment (EPSDT) periodicity schedule, which was submitted with the annual CMS-416 report. While we have been pleased with the gains South Carolina has made in screening and participation, we are concerned with the overall low number of required screenings on your State's periodicity schedule, and the fact that this schedule has not changed in more than a decade.

According to 1905(r)(1)(A)(i) of the Social Security Act, screening services should be provided "at intervals which meet reasonable standards of medical and dental practice, as determined by the State after consultation with recognized medical and dental organizations involved in child health care". States are encouraged to consult periodically with a variety of independent experts to create standards for children receiving Medicaid benefits that are in keeping with widely accepted standards of preventative care.

As an alternative, some States have chosen to adopt periodicity standards developed by nationally recognized programs. An example would be the periodicity schedule developed by the American Academy of Pediatrics (AAP) for their *Bright Futures* program.

In keeping with recommendations like those from the AAP, most States nationally have adopted a standard of approximately one periodic screening per year from age 6 through age 20. Currently, South Carolina's standard is approximately one periodic screening every two years between those ages.

CMS shares South Carolina's dedication to ensuring the health of their youngest Medicaid beneficiaries. We would like to work with you in furthering that goal. To that end, we are requesting the following information:

1. Who in your State is responsible for creating the EPSDT periodicity schedule?
2. What recognized medical and dental organizations were consulted in creating it?
3. How often is the EPSDT periodicity schedule reviewed?
4. What were the basis and/or methodology that went into creating the current standard?

If you have any questions, please contact our EPSDT coordinator, Catherine Cartwright, at 404-562-7465 or by email at [catherine.cartwright@cms.hhs.gov](mailto:catherine.cartwright@cms.hhs.gov). Thank you in advance for your assistance in this matter.

Sincerely,

A handwritten signature in cursive script that reads "Jackie Glaze".

Jackie Glaze  
Acting, Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

Log # 423

May 7, 2010

Ms. Jackie Glaze  
Acting Associate Regional Administrator  
Division of Medicaid & Children's Operations  
61 Forsyth Street, Southwest, Suite 4T20  
Atlanta, Georgia 30303-8909

Dear Ms. Glaze:

Thank you for your letter dated April 9, 2010 concerning South Carolina's Early and Periodic Screening, Diagnostic and Treatment (EPSDT) periodicity schedule. We welcome the opportunity to address your concerns.

The current EPSDT periodicity schedule utilized by the South Carolina Department of Health & Human Services (SCDHHS) is viewed as a minimum requirement for preventative health services for Medicaid-eligible children from birth to age 21. Additional services, including yearly EPSDT visits, are available if a provider feels that more than the minimum required services are necessary.

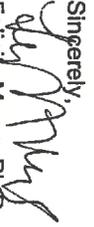
The SCDHHS is dedicated to providing the best possible care for all South Carolina Medicaid beneficiaries and agrees that our current policy regarding EPSDT Services has become outdated and in need of revisions. SCDHHS staff has been aware of this need and are working actively towards updating our policy. Due to budget restraints over the past two (2) years, this revision has taken longer than expected. However, our projected completion date for this revision is late Fall 2010.

We are consulting with our Medical Director, Dr. Marion Burton, President-Elect of the American Academy of Pediatrics, for his guidance in creating our new policy. We are also utilizing the information contained in the *Bright Futures* program developed by the American Academy of Pediatrics. Finally, we are also reviewing the current policies of other State Medicaid programs to compare how they have implemented their program.

In your letter you requested the following information:

- 1. Who in your state is responsible for creating the EPSDT periodicity schedule?**  
The EPSDT coordinator for South Carolina is William Feagin, Team Leader in the Division of Physicians, Pharmacy, and DME Services. He can be reached by email [feaginw@scdhhs.gov](mailto:feaginw@scdhhs.gov) or by phone (803) 898-2660 regarding the EPSDT program and status of our policy revision.
- 2. What recognized medical and dental organizations were consulted in creating it?**  
In our effort to update our EPSDT policy, SCDHHS has utilized information provided by the American Academy of Pediatrics, National Academy for State Health Policy, American Dental Association, and the American Academy of Pediatrics Dentistry.
- 3. How often is the EPSDT Periodicity Schedule reviewed?**  
The EPSDT policies, as well as other physician related policies, are on a five year schedule for a complete review. As stated before, the EPSDT policy review is behind schedule due to budget restraints, but should be completed by late Fall 2010.
- 4. What were the basis and/or methodology that went into creating the current standard?**  
The current policy was based on recommendations and guidelines set forth by the American Academy of Pediatrics at the time.

If you should have any questions, please call me at (803) 898-2500 or you may contact Mr. William Feagin, Team Leader in the Division of Physician, Pharmacy, and DME Services at (803) 898-2660.

Sincerely,  
  
Felicity Myers, Ph.D.  
Deputy Director

FM/gws