Aetna Better Health® of Kansas

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The Early and Periodic Screening, Diagnostic, and Treatment

The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) service is a federally mandated program administered by Medicaid.

- Members do not have to apply to receive EPSDT services, anyone under the age of 21 eligible for Medicaid is eligible for EPSDT services.
- Children under age 21 who are enrolled in an HCBS (Home and Community Based Service) waiver program are also entitled to all EPSDT services.
- Waivers and EPSDT can be used together to provide a comprehensive benefit for children with disabilities.
- Kansas has adopted the Bright Futures/AAP Periodicity Schedule as a standard for pediatric preventive services through EPSDT programs.

Provider responsibilities:

Requesting prior authorization and referral for medically necessary EPSDT services in the event of a health, diagnostic, preventive, or rehabilitative service or treatment not otherwise covered that is required by the member.

	Action
1.	Member is seen by medical provider: • under the age of 21
	The provider recommends a service that he/she determines is medically necessary to correct or ameliorate defects and physical and mental illnesses or conditions.
2.	Provider makes a request for services that are not regularly provided (i.e., personal care services, daily living aids, or etc.) • Prior authorization initiated by the provider to determine "medical necessity" • PA (Prior Authorization) will be authorized through the MCO (Managed Care Organization) prior authorization process • Forms are available on Aetna Better Health of Kansas website abhks_pa_ph_fax_form.pdf (aetnabetterhealth.com) physical health PA form Form 5_DRAFT_BH Prior Auth Fax Form (aetnabetterhealth.com) behavioral health PA form
	Limitations and exclusions, other than the requirement for medical necessity and cost effectiveness, do not apply to EPSDT.

Questions: Contact Aetna Better Health of Kansas by email at ABHKS_QM_Operations@aetna.com