

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, California 95814



June 13, 2002

ALL-COUNTY LETTER NO. 02-43

TO: ALL COUNTY WELFARE DIRECTORS
ALL IHSS PROGRAM MANAGERS

REASON FOR THIS TRANSMITTAL
<input type="checkbox"/> State Law Change <input type="checkbox"/> Federal Law or Regulation Change <input type="checkbox"/> Court Order or Settlement Agreement <input checked="" type="checkbox"/> Clarification Requested by One or More Counties <input type="checkbox"/> Initiated by CDSS

SUBJECT: COORDINATING SERVICES BETWEEN IN-HOME SUPPORTIVE
SERVICES AND EARLY AND PERIODIC SCREENING, DIAGNOSIS
AND TREATMENT SERVICES

This All-County Letter provides information on the Medi-Cal Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program, and provides guidance on the need for coordination between In-Home Supportive Services (IHSS) and EPSDT supplemental services.

EPSDT Background

Federal Medicaid law establishes a list of health care benefits and services that state Medicaid programs must furnish. The federal law also establishes a list of services and benefits that states may cover at their option under their Medicaid programs.

The EPSDT services are a federally mandated Medicaid (Medi-Cal) benefit for Medi-Cal beneficiaries who are under the age of 21. In California the EPSDT program is provided under the Child Health and Disability Prevention Program.

Under EPSDT, Federal law also mandates that any health care service or benefit that a state could opt to provide under its Medicaid program must be provided to an individual if the service or benefit is medically necessary to correct or ameliorate a defect or a physical or mental illness. This federal rule applies to all optional Medicaid services and benefits regardless of whether or not a state has opted to cover the service or benefit under its Medicaid program. These services are referred to as “EPSDT supplemental services.”

Under EPSDT, when a Medi-Cal beneficiary requires “diagnostic or treatment” services for a condition identified as the result of an EPSDT screening, these services are to be furnished through and funded by the Medi-Cal Program.

Is EPSDT an Alternative Resource?

Not always, for instance, one of the EPSDT supplemental services is private duty nursing care. In authorizing home nursing care, these services may include such services as bathing or range of motion exercises that have also been authorized by the In-Home Supportive Services/Personal Care Service Program (IHSS/PCSP) social worker. The Medi-Cal EPSDT supplemental services should not be automatically considered an alternative resource when assessing the need for IHSS/PCSP services. The EPSDT recipient may choose to receive an authorized IHSS service from either EPSDT or IHSS/PCSP, but not from both programs. It is important that there be no duplication of services.

Procedure

Counties must coordinate the needs assessment of EPSDT recipients through the following procedure:

1. The IHSS social worker must determine if the applicant or recipient is receiving Medi-Cal EPSDT Supplemental nursing or other services in the home. It is probable that the recipient is receiving EPSDT supplemental services if the recipient is a child under the age of 21 and receiving nursing services at home through the Medi-Cal program. If they are receiving EPSDT a licensed nurse or a Certified Home Health Aide may be providing home nursing services. As noted above, the services that are provided by these individuals could include personal care services such as bathing, range of motion, ambulation or paramedical care.
2. If the applicant or recipient is receiving EPSDT supplemental nursing services in their home, the IHSS social worker must contact Department of Health Services Medi-Cal In-Home Operations (IHO) to identify the nurse case manager assigned to the recipient. We are attaching a brief description of Medi-Cal IHO, and a copy of IHO list of contact numbers for their offices in Northern and Southern California.
3. In cases where duplicate service authorization occurs, the recipient must be provided the choice of receiving the service from either their IHSS/PCSP provider or from the EPSDT home nursing provider. This could mean that both a nurse and an IHSS/PCSP provider could be present in the child's home at the same time to provide personal care services. The IHSS social worker and IHO nurse case manager should coordinate in developing or amending the recipient's care plan.
4. Only if the recipient elects to receive care from their EPSDT supplemental services provider instead of their IHSS provider, should counties adjust the assessed IHSS accordingly. In some cases, this may mean that added IHSS/PCSP hours become available to meet the recipient's unmet need for other IHSS/PCSP services.

If you have questions or concerns, you may contact your assigned Operations and Technical Assistance Unit staff member at (916) 229-4000.

Sincerely,

***Original Signed by Donna L. Mandelstam
Date Signed June 13, 2002***

DONNA L. MANDELSTAM
Deputy Director
Disability and Adult Programs Division

Attachment

[In Home Operations \(IHO\) Information Packet/Quick Reference Guide, Department of Health Services-Medical Operations Division](#)