

SUPPORTIVE SERVICES

EPSDT

HCBS

Early, Periodic, Screening, Diagnosis, and Treatment (EPSDT) for children and youth with disabilities

A federally mandated program for children on Medicaid.

Transitioning from EPSDT to Home and Community Based Services (HCBS)

Medicaid Services for adults with disabilities

CONTINUITY OF CARE

EPSDT

Benefits of Early, Periodic, Screening, Diagnosis, and Treatment (EPSDT) for children and youth with disabilities

EPSDT is an essential part of Medicaid designed to ensure that children and youth under the age of 21 receive comprehensive and preventative healthcare services. It is important because it provides a wide range of health services early in a child's life to help provide appropriate treatment for potential health conditions and disabilities, preventing more serious issues from developing later. EPSDT can help children and youth with disabilities into adulthood by providing the individualized care they need.

A federally mandated program for children on Medicaid.

E EARLY

Care should start as early as possible. This means children are entitled to services from birth. Services include physical, dental, and developmental care, among others.

P PERIODIC

Children must receive regular health check-ups to monitor their health and development.

S SCREENING

These regular health check-ups must include screenings to identify physical, mental, intellectual, developmental, dental, hearing, vision, and other potential health diagnosis early.

D DIAGNOSIS

If screening detects a health condition or disability, further diagnostic tests must be done to get a evaluate if a diagnosis is needed.

T TREATMENT

Once a diagnosis is made, the necessary treatment must be provided to manage the health-related need and disability.

What Makes EPSDT Unique:

EPSDT is specifically for any child who receives Medicaid. It covers a **wide range of services**, many of which are not covered by Medicaid for adults. These include therapies, medical equipment, and other specialized services necessary for children with disabilities. EPSDT also mandates **preventive care**, which is critical for early intervention in children with developmental disabilities or chronic health conditions.

EPSDT is a critical component of Medicaid, particularly for children and youth with disabilities. It ensures that children under the age of 21 who are eligible for Medicaid have access to a comprehensive range of healthcare services to diagnose, treat, and manage disabilities early in life.

Here are the key EPSDT benefits for children with disabilities:

COMPREHENSIVE SCREENING AND DIAGNOSTIC SERVICES

EPSDT ensures that children receive routine health screenings, which are essential for identifying disabilities early. These screenings include:

- **Developmental screenings** to detect physical, cognitive, and emotional delays.
- **Mental health screenings** to diagnose conditions such as ADHD, autism, or other behavioral health diagnosis.
- **Vision, hearing, and dental screenings** to detect sensory disabilities that could affect learning and social development.

Early identification of these disabilities allows for timely intervention, which can significantly improve long-term outcomes.

ACCESS TO SPECIALIZED TREATMENTS AND THERAPIES

Children with disabilities often need specific treatments or therapies to address their individual needs.

EPSDT covers specialized services, including:

- **Speech therapy** for children with communication disabilities.
- **Occupational therapy** to help with fine motor skills, daily living activities, and sensory integration.
- **Physical therapy** for children with mobility disabilities.
- **Mental health:** managing behaviors

These services aim to maximize the child's developmental potential and improve quality of life.

DURABLE MEDICAL EQUIPMENT (DME)

EPSDT covers medical equipment that children with disabilities may need, such as:

- **Mobility Devices** such as wheelchairs, walkers, prosthetics, canes, etc.
- **Hearing aids** for children with hearing disabilities.
- **Communication devices** for children who are non-verbal or have speech disabilities.
- **Specialized beds or lifts** for children with mobility challenges.

These equipment are crucial for ensuring that children with disabilities can engage in everyday activities and participate in their communities.

IN-HOME SUPPORT AND PERSONAL CARE SERVICES

EPSDT also includes **in-home care services** for children with disabilities who may need assistance with activities of daily living, such as:

- Bathing, dressing, and eating.
- Administering medications.
- Monitoring chronic health conditions.

These services allow children to stay in their homes, rather than being placed in institutional care, while still receiving the support they need.

MENTAL HEALTH AND BEHAVIORAL HEALTH SERVICES

Children with emotional or mental health disabilities are eligible for **comprehensive mental health services**, including:

- Counseling and therapy for managing conditions such as depression, anxiety, or trauma.
- Psychiatric services for children who need medication management or behavioral interventions.

EPSDT ensures that mental and behavioral health services are integrated with medical care, promoting holistic health for children with disabilities.

MEDICALLY NECESSARY SERVICES BEYOND STANDARD MEDICAID BENEFITS

One of the most significant aspects of EPSDT is that it goes beyond the standard Medicaid benefits. Even if a service is not typically covered under Medicaid, if it is deemed "**medically necessary**" for the treatment of a child's condition, EPSDT requires that the service be provided. Not limited to:

- Specialized surgeries.
- Advanced diagnostic tests (such as MRIs).
- Extended hospital stays or rehabilitation services.

EARLY INTERVENTION SERVICES

For infants and toddlers with disabilities, EPSDT ensures access to early intervention services that support development in the critical early years. These services may include:

- **Developmental therapy** for children showing signs of developmental delays.
- **Family training and counseling** to help parents support their child's development.
- **Nutritional services** for children with feeding difficulties or special dietary needs.

Early intervention can significantly improve developmental outcomes and help children with disabilities reach key milestones.

TRANSITION SUPPORT FOR ADOLESCENTS

As children with disabilities grow older, EPSDT helps prepare them for the transition to adult care and services. This includes:

- **Transition planning** for healthcare needs as they age out of pediatric care.
- **Vocational services** to support independent living and employment.

Adolescents with disabilities can receive continued support to manage their health needs and pursue independence.

Conclusion:

EPSDT offers a robust set of services for children with disabilities, ensuring that they receive the medical, therapeutic, and developmental care they need at every stage of growth. By providing comprehensive, medically necessary services, EPSDT plays a crucial role in helping children with disabilities achieve better health outcomes and a better quality of life. Families, caregivers, and youth should be aware of these benefits to advocate for their child's rights and secure the necessary care for their individual needs.

It is important to note that many children and youth are on waiting lists for Medicaid waiver services. It is recommended to apply for a waiver once an eligible diagnosis has been made. However, children and youth do not have to wait to receive essential support while they wait because they will be automatically eligible for EPSDT. Please keep in mind that Home and Community Based Services (HCBS) waiver services start after state plan Medicaid services, like EPSDT, are exhausted. It is critical to apply for waiver services early so waiver services can start early in addition to EPSDT. Waiver enrollment will not be a requirement for children receiving EPSDT.

Advocate:

Understanding EPSDT is essential for ensuring children and youth with disabilities receive the care they are entitled to. If you encounter barriers or services are denied, you have the right to advocate and request the full range of EPSDT services.

This resource is designed to empower you with the knowledge to navigate the Medicaid system and ensure you or your child receive the services they need for their health and well-being.

For more information, visit the South Carolina Department of Health and Human Services website at scdhhs.gov/resources/programs-and-initiatives/epsdt

Or call at 888-549-0820.

HCBS

Transitioning from EPSDT to Home and Community Based Services

Home and Community-Based Services for Adults with Disabilities

Transitioning from the Early, Periodic Screening, Diagnostic, and Treatment (EPSDT) program to Home and Community Based Services (HCBS) can be a significant process for families and individuals with disabilities. These two programs serve different purposes, but both aim to support individuals in receiving necessary services and care, with a shift in focus when moving from EPSDT (primarily pediatric and health-related) to HCBS (more focused on long-term care and community living).

Transition Point: When the individual ages out of EPSDT, they will no longer qualify for EPSDT services and must change to other adult services like HCBS.

SERVICES PROVIDED

- **EPSDT:** Covers a wide range of services, including doctor visits, hospital care, dental services, mental health, behavior support, vision and hearing care, and developmental screening and related services.
- **HCBS:** Offers services aimed at allowing individuals to remain in their homes and communities, such as personal care assistance, respite care, home modifications, transportation, and supported employment.

SERVICE COORDINATION

Transition Point: Transitioning to a new case manager under HCBS may require creating a new care plan and accessing different community-based resources.

Key aspects in transitioning:

ELIGIBILITY

- **EPSDT:** Available to individuals under the age of 21 who are enrolled in Medicaid. It provides comprehensive and preventive health care services, including screenings, diagnostics, and treatment.
- **HCBS:** Primarily supports people with disabilities, chronic illnesses, or senior citizens to live independently in their homes or communities rather than in institutions. In South Carolina, to be eligible for HCBS, a person would need to be enrolled in one of the following waivers:
 - Intellectual Disability and Related Disabilities (ID/RD) Waiver
 - Head and Spinal Cord Injury (HASCI) Waiver
 - Community Supports (CS) Waiver
 - Community Choices (CC)
 - HIV/AIDS
 - Mechanical Ventilator Dependent (Vent)
- If adults on Medicaid are not on a waiver, no worries because community based services are available by the state plan Medicaid Program.

Transition Point: As the focus moves from child development and prevention to supporting independent living and long-term care, individuals may need to switch providers or service types.

- **EPSDT:** Managed through Medicaid and often coordinated by pediatricians, family doctors, or by a Managed Care Program.
- **HCBS:** Services are typically coordinated through a case manager or care coordinator. They work with the individual and their family to develop a personalized care plan that supports their specific needs in a community-based setting.

FUNDING & WAIVERS

- **EPSDT:** Funded through Medicaid, and services are covered as long as they are medically necessary until the age of 21.
- **HCBS:** Often funded through Medicaid waivers, which provide flexibility for states to offer non-institutional care. Common waivers include the 1915(c) waiver for long-term services and supports.

Transition Point: Individuals and families must apply for HCBS waivers, which may have waiting lists or different qualification criteria.

Key Considerations:

- **Planning Early:** Start the transition process before the individual turns 21, as HCBS applications and waiver approvals can take years.
- **Understanding Changes in Service Providers:** Identify new providers specializing in adult services, particularly in-home care or independent living support.
- **Continuity of Care:** Work closely with EPSDT coordinators and HCBS case managers to ensure no gap in care or services during the transition.
- **Advocacy and Support:** Families and individuals should be proactive in planning this transition. Connecting with local advocacy organizations, case workers, and Medicaid representatives early in the process will help them navigate paperwork, understand benefits, and secure the necessary services without interruptions.

For more information, visit the South Carolina Department of Health and Human Services website at scdhhs.gov/resources/programs-and-initiatives/epsdt
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