

September 2025

## Background

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit services are delivered through the Nevada Medicaid Healthy Kids (EPSDT) Program. The services are preventive and comprehensive health care available to Medicaid-enrolled and Nevada Check-Up-enrolled babies, children, teens, and young adults under 21 years of age. The program is designed to identify medical conditions and provide medically necessary treatment to correct or ameliorate (improve) such conditions.

Healthy Kids (EPSDT) offers the opportunity for optimum health status for children through regular, preventive health services and the early detection and treatment of disease. Services must adequately treat the condition in amount, duration, or scope.

Healthy Kids (EPSDT) is key to ensuring that children and youth receive appropriate preventive, dental, mental health, developmental, and specialty services.

Please see below for additional details related to the EPSDT benefit focus:

**Early:** Assessing and identifying problems early

**Periodic:** Checking children's health at periodic, age-appropriate intervals

**Screening:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems

**Diagnostic:** Performing specific tests to follow up when a risk is identified, and

**Treatment:** Controlling, correcting, ameliorating, or improving health problems found.

## Eligibility & Covered Services

Healthy Kids (EPSDT) is made up of screening, diagnostic, and treatment services that are medically necessary. **Any request for services for a recipient under 21 years of age is a request for Healthy Kids (EPSDT) services.** No request for services for a recipient under 21 will be denied, formally or informally, until it has been evaluated under the EPSDT guidelines.

Consistent with federal and state law, Nevada Medicaid will only cover services if they are provided by an enrolled or contracted Nevada Medicaid provider for the specific service type. This may include an out-of-state provider who is willing to enroll if an in-state provider or service is not available.

## Periodicity Schedule

Nevada has adopted the American Academy of Pediatrics Bright Futures Periodicity schedule that can be found at [https://downloads.aap.org/AAP/PDF/periodicity\\_schedule.pdf](https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf).

All babies, children, teens, and young adults should receive regular check-ups for their physical and mental health, growth, development, and nutritional status. It is recommended that children

receive a comprehensive screening at least once a year, with additional visits as needed for follow-up care or specific health concerns.

## Screening

- Comprehensive unclothed physical exam
- Appropriate vaccinations (according to the Advisory Committee on Immunization Practices)
- Laboratory tests (including lead screenings, which are a requirement for all Medicaid eligible children at 12 and 24 months or between the ages of 36 and 72 months if not previously tested)
- Health Education (anticipatory guidance including child development, healthy lifestyles, and accident and disease prevention)

## Vision

At a minimum, diagnosis and treatment for defects in vision, including eyeglasses, are offered.

## Dental

At a minimum, dental services include relief of pain and infections, restoration of teeth, and maintenance of dental health, including examinations, cleanings and fluoride treatments are offered. Nevada has adopted the American Academy of Pediatric Dentistry Periodicity schedule that can be found at the QR code below (<https://www.aapd.org/research/oral-health-policies--recommendations/periodicity-of-examination-preventive-dental-services-anticipatory-guidance-counseling-and-oral-treatment-for-infants-children-and-adolescents/periodicity-chart/>).



## Hearing

At a minimum, hearing services include diagnosis and treatment for defects in hearing, including hearing aids are covered.

## Interperiodic Screenings

Additional screenings and health care services outside of the periodicity schedule that are determined to be medically necessary are covered.

## Diagnostic Services

When a screening indicates the need for further evaluation, diagnostic services are covered and must be provided.

## Treatment

Necessary health care services are covered and must be made available for treatment of all physical and mental illnesses or conditions discovered by any screening and diagnostic procedures.

## Referral

If a provider is not appropriately licensed or if the necessary service is out of the provider's scope of practice, a referral to a qualified provider will be made for screening, diagnostic, and treatment purposes.

## Case Management

Nevada provides case management and outreach to recipients through the statewide Medicaid customer service line at (702) 668-4200 or (775) 687-1900. A Health Care Coordinator can be assigned to assist with information for all Medicaid and Nevada Check-Up eligible individuals under 21 years of age on EPSDT services, the need for age-appropriate health care screenings and visits, immunizations, and transportation assistance.

## Medical Necessity & Prior Authorizations

*Medical necessity* is determined on a case-by-case basis. There is no limit to medically necessary services covered by Healthy Kids (EPSDT), including the amount, duration, and scope of services. To exceed existing service limitations, prior authorization is required. Medically necessary services not included in the state plan must be provided with approved prior authorization. The Quality Improvement Organization (QIO)-like vendor will review prior authorization requests to ensure they meet current medical practice standards. Provider recommendations will be taken into consideration, but are not the sole determining factor in coverage.

All services requiring prior authorization must be requested online through the Nevada Medicaid provider portal at [www.Medicaid.NV.gov](http://www.Medicaid.NV.gov). Required forms are available on this website. If you have prior authorization questions, please contact the Prior Authorization Department at (800) 525-2395.

## What is not included

- Services that are not medical in nature
- Experimental or investigational treatments, including clinical trial participation
- Services or items not generally accepted as effective; and/or not within the normal course and duration of treatment
- Services for the caregiver or provider's convenience
- Services that are not medically necessary

## Provider responsibility

For information regarding provider responsibilities, please see the Provider Responsibility section in Medicaid Services Manual Chapter 1500 (<https://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C1500/Chapter1500/>).

For billing and claims regarding Healthy Kids (EPSDT), see the billing guide for provider types 20, 24, 77 (<https://www.medicaid.nv.gov/providers/BillingInfo.aspx>).

## Managed Care

- All Healthy Kids (EPSDT) requirements must be adhered to for individuals who receive services under managed care.
- Nevada Medicaid is responsible for medically necessary services not included in the managed care contract.

- Services outside of the Nevada Check Up state plan are not included in the managed care contract.
- It is the responsibility of the managed care entity to ensure recipients are aware of the Healthy Kids (EPSDT) program and to assist recipients in accessing benefits and services.

## Coverage and Waiver Programs

- Home and Community-Based Services are available only to participants in the waiver programs and are not a part of the Healthy Kids (EPSDT) benefit.
- Any recipient enrolled in a waiver program can receive BOTH waiver services and Healthy Kids (EPSDT) services.
- Services must be provided to recipients under 21 years of age in a waiver program under the same standards as other recipients under 21 years of age receiving Medicaid services.

## Centers for Medicare and Medicaid (CMS) EPSDT 416 Report

Nevada is required to report a specific matrix to the federal government on the EPSDT CMS-416, which includes, but is not limited to:

- The number of children provided with child health screening services;
- The number of children referred for corrective treatment;
- The number of children receiving dental services, broken down by type of service and type of provider; and
- The State's results in attaining the participation goals set for the States under section 1905(r).

## Authorities

- Social Security Act, Section 1905(a)(4)(b) – list of services;
- Social Security Act, Section 1905(r) of the Social Security Act – definition of EPSDT benefit (OBRA 1989)
- Social Security Act 1902 (a)(43) – administrative requirements;
- Social Security Act, Section 1902(a)(10), following (G) – exception to comparability
- Social Security Act 1903 (i);
- 42 Code of Federal Regulations (CFR), Subpart B, 441.50 – 441.62;
- CMS, Part 5 of State Medicaid Manual – services;
- CMS, Part 2 of State Medicaid Manual – data; and
- Nevada Medicaid's State Plan.

## Have questions or need more information?

**Providers can email:** [MedicalPrograms@nvha.nv.gov](mailto:MedicalPrograms@nvha.nv.gov) (Please write "EPSDT" in the subject line)

**Recipients can email:** [DHCFP@nvha.nv.gov](mailto:DHCFP@nvha.nv.gov) (Please write "EPSDT" in the subject line)

**Website:** <https://dhcfp.nv.gov/Pgms/CPT/EPSDT/>