

June 30, 2023

Early Periodic Screening, Diagnostic and Treatment (EPSDT) Information and On-demand Training

Watch the 18-minute EPSDT [training](#) on our website and take a [quick survey](#), learn about prior authorizations and claims. Video presenter Yalanda Thomas, an EPSDT Manager with AmeriHealth Caritas Family of Companies (ACFC) orients viewers, on the Oral Health Periodicity Schedule, patient screening visits, referral requirements and more.

Provided below are FAQs so providers can locate the resources needed to support our members under 21 years of age.

1. How should a provider submit an EPSDT preventative service claim or how is the EP modifier used?
Using [NaviNet](#), the EP modifier **Complete Screen** should be used when submitting a preventative service claim.
2. Is a prior authorization required for preventative services?
No, EPSDT preventative services (early and periodic screens/wellness visits) will not require prior authorization from ACNC. Prior authorization may be required for other EPSDT diagnostic and treatment products. Use our [Prior Authorization Lookup tool](#) for immediate guidance on prior authorization requirements.
3. Where can a provider submit an EPSDT prior authorization or how are providers notified if their prior approval was approved or denied?
Use our [Prior Authorization Lookup tool](#) for immediate guidance on prior authorization requirements and modes of submission for all prior authorization requests (including requests that will be reviewed using EPSDT criteria). Providers receive notification of prior approval decisions by fax and/or telephone call from our Utilization Management team. If the prior approval was submitted via the provider portal, the decision will be loaded into the portal.
4. How will EPSDT claims be paid and chased by ACNC?
Having confirmed the member is under 21 years of age, claims will be identified based on the presence of Third-Party Liability (TPL) in the member's record. The claims identified with TPL that also meet the following criteria (A or B), will be paid by ACNC, who will then follow-up with the primary carrier for payment:
 - A. Claims for preventative services that do not require prior authorization.
 - B. Claims with a Prior Authorization approved under EPSDT on file for services that require prior authorization.

5. What can providers expect when billing and receiving payment for EPSDT claims?
EPSDT claims will be paid in a timely and accurate manner. Medical payment cycles run every Monday, Wednesday, and Friday. Pharmacy payment cycles run every four days.
6. How can providers check their EPSDT claims status?
Log into [NaviNet](#) and see the [Claims Status Inquiry link](#) under Workflows on the left-hand side, or call Provider Services at 1-888-738-0004.
7. How does a provider file a grievance for an EPSDT claim?
Log into [NaviNet](#) and see the [Forms and Dashboards link](#) under Workflows on the left-hand side to select Grievance and Appeals. **Submit a grievance**, fill out the grievance form and submit. ***Upon submission, write down the Document ID # shown and call Provider Services at 1-888-738-0004 for inquiries.***

Visit the [Provider section](#) of the AmeriHealth Caritas North Carolina website for more information, news and resources for providers. If you need assistance regarding this email or other issues, please [contact](#) your Account Executive or AmeriHealth Caritas North Carolina's Provider Network Management leadership.