

## New Guidance from CMS on Medicaid's EPSDT Benefit Related to Transition

The Centers for Medicare & Medicaid (CMS) issued a lengthy [State Health Official letter](#) in September 2024, detailing federal requirements, strategies, and best practices to support states' implementation of Medicaid's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit. EPSDT includes an expansive set of mandatory and optional services for Medicaid-insured children under 21 and children in 16 state separate Children's Health Insurance Program (CHIP) programs that use the EPSDT benefit.

This letter from CMS includes two provisions related to transitions in care and insurance coverage. While the services described are not mandatory, the letter shares guidance about what transition services can be provided as part of the EPSDT benefit.

1. States and managed care plans (MCPs) can use care coordination and case management for older children who will no longer be eligible as a child under Medicaid and will lose their EPSDT benefit. This can involve the development of a comprehensive care plan that outlines the transition process, including referrals to appropriate providers and services. CMS calls for this planning to begin well in advance of a beneficiary's transition, with assistance from transition coordinators or care managers to assist with coordinating appointments, transferring medical records, and connecting young adults with new health care providers. They also call for the level of care coordination and case management to be appropriate to meet complex patient needs.
2. For older children transitioning from pediatric to adult care – especially those with complex medical, developmental, or behavioral health conditions and youth in foster care – case managers and care coordinators should help to identify alternatives for services previously covered by EPSDT, but not available under the adult Medicaid benefit package. In addition, assistance should be offered in finding other coverage in states where young adults are no longer eligible for Medicaid.

### Resources from Got Transition

To address this CMS guidance, Got Transition suggests that state Medicaid agencies and MCPs use or customize its [transition plan](#), [medical summary](#), and [transfer of care checklist](#) available in the Six Core Elements of Health Care Transition™. To consider additional ways EPSDT can be strengthened for transition-aged youth and young adults, please see:

- [Medicaid and CHIP Policy Brief](#), with recommendations to support continuous care and coverage among low income and disabled youth and young adults losing their childhood eligibility status.
- [Medicaid Managed Care Contract Language to Expand the Availability of Pediatric-to-Adult Transitional Care](#), with suggestions for improving MCP requirements related to health care transition.
- [Incorporating HCT Services into Preventive Care for Adolescents and Young Adults](#), with age-specific anticipatory guidance.
- [2023 Coding and Payment Tip Sheet](#), with transition-related codes, Medicare fees, and transition vignettes.

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