

## **EPSDT Strategy Guides to Support States with the Medicaid Benefit for Children and Adolescents**

In 1967, Congress introduced the Medicaid benefit for children and adolescents, known as Early and Periodic Screening, Diagnostic and Treatment (EPSDT). The goal of this benefit is to ensure that children under the age of 21 who are enrolled in Medicaid receive age-appropriate screening, preventive services, and treatment services that are medically necessary to correct or ameliorate any identified conditions – the right care to the right child at the right time in the right setting. This broad scope supports a comprehensive, high-quality health benefit. States share responsibility for implementing the EPSDT benefit with the Centers for Medicare & Medicaid Services. (For more information, see "[What You Need to Know about EPSDT](#)".)

### **Lead Screening**

CMS has updated its Medicaid lead screening policy for children eligible for EPSDT services. For more information, see the [June 2012 Informational Bulletin](#). CMS recognizes that lead poisoning continues to be a problem for a small share of low-income children. To improve screening of children most at risk for lead exposure, CMS is aligning Medicaid lead screening policy with current recommendations of the Centers for Disease Control and Prevention (CDC). The new policy encourages a targeted screening approach in States that have sufficient data to support this action. We have developed materials to assist States with the process of determining their lead screening approach going forward. CMS and CDC have developed [guidance and process](#) for States that want to request to move to a targeted screening approach. Interested States should send requests and supporting documentation to the EPSDT mailbox at [EPSDT@cms.hhs.gov](mailto:EPSDT@cms.hhs.gov), with the subject line: "Request for Use of Targeted Lead Screening."