For accessible formats of this information or assistance with additional equal access to human services, write to dhs.childteencheckups@state.mn.us, call 651-431-5655, or use your preferred relay service.
General Information
About the Provider Guide
The Child and Teen Checkups (C&TC) Provider Guide is designed to offer providers and clinic staff information about the program, and must be used in conjunction with the Minnesota Health Care Programs (MHCP) Provider Manual. The MHCP Provider Manual is the primary information source for MHCP coverage policies, rates and billing procedures.

Program Introduction
Each state is required by the Centers for Medicare & Medicaid Services (CMS) to provide comprehensive and quality preventive well-child care for children eligible for Medicaid through the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program. In Minnesota, this is called Child and Teen Checkups (C&TC). The frequency and components of C&TC are outlined in the Minnesota Child and Teen Checkups (C&TC) Schedule of Age-Related Screening Standards (also known as the periodicity schedule). C&TC is administered by the Minnesota Department of Human Services (DHS) in partnership with the Minnesota Department of Health (MDH).

Eligibility
There are two program requirements:

1. **Age** – birth through age 20
2. **Financial** – currently enrolled in Medical Assistance (MA) or Minnesota Care (MNCARE)

MN–ITS Eligibility Verification
Use MN–ITS to verify a child or teen’s eligibility for MHCP and if they are enrolled in a health plan. Visit the [MN–ITS: Home](#) webpage and click the Verify eligibility link under the What can I do here? heading.

Roles & Responsibilities of C&TC Program Partners
Providers
Providers play a central role to ensure that children and adolescents receive appropriate preventive, dental, mental health, developmental and specialty services.
The C&TC Program emphasizes the need to avoid fragmented care and the importance of continuity of health care. Providers can assist in reducing duplication of services by coordinating complete C&TC screening services with ongoing well-child care such as:

- Newborn or well-baby checkups
- School health screenings
- Camp or athletic physicals
- Routine well-child care
- Family planning services
- WIC (Special Supplemental Nutrition Program for Women, Infants and Children) clinics
- Head Start physicals
- Immunizations
- Initial prenatal visits
- Early childhood screenings

Providers perform C&TC screenings and document all of the components provided according to the:

- C&TC Schedule of Age-Related Screening Standards (C&TC Screening Component Periodicity Schedule)
- Child and Teen Checkups Fact Sheets

Providers may use the DHS age-specific documentation forms from the C&TC – EPSDT resources webpage to record visits for each of the recommended screenings or as a template for reference when designing their own form or electronic health record.

Screenings may be provided at inter-periodic intervals when medically indicated, and these extra visits are allowed and reimbursable.

At a C&TC screening, providers are expected to:

- Identify and treat health problems.
- Provide anticipatory guidance and instruct child, parent or guardian when next screening is due and why it is important to return for the next checkup.
- Refer child for further assessment, diagnosis, and treatment when appropriate. The referral may be made to the screening provider or another provider.
- Provide verbal dental referral for preventive dental care at every screening.
- Use appropriate C&TC HIPAA-Compliant Referral Condition Codes on billing forms.

Billing C&TC screening services accurately is necessary to:

- Identify the claim as a complete C&TC screening.
o Ensure appropriate provider reimbursement.
o Identify referrals made as a result of a C&TC screening, which allow for tribal or county public health C&TC staff to offer assistance with accessing referral follow-up services.
o Collect federally required data.

**Minnesota Department of Human Services (DHS)**

DHS is responsible for the administration, organization, implementation and oversight of the program, including compliance with CMS requirements. Currently, DHS contracts with Community Health Boards (CHBs) and Tribal Governments (Tribes) to provide C&TC administrative services which includes outreach to families, young adults and providers.

DHS enrolls MA providers, provides technical assistance, training and reimbursement of fee-for-service (FFS) claims.

The [Child and Teen Checkups (C&TC)](https://www.dhs.state.mn.us) section of the MHCP Provider Manual provides an overview for C&TC enrollment, billing and claims and should be the primary billing information source. The following conditions apply to C&TC claims:

- Only enrolled MHCP C&TC providers can bill for C&TC.
- Paid at a bundled rate.
- Refer to the [C&TC Schedule of Age-Related Screening Standards (Periodicity Schedule) (DHS-3379) (PDF)](https://www.dhs.state.mn.us) for Minnesota’s age-related screening standards schedule details.
- Every claim must list the most appropriate [HIPAA-compliant referral condition code](https): ST, S2, AV or NU.
- If HCPCS code S0302 is reported without a HIPAA-compliant referral condition code on the claim, the claim will deny.
- If a screening component is not appropriate or cannot be performed, follow the billing guidelines for the situations listed in the [claim guideline exceptions table](https).
- Follow the medical record documentation requirements of screening components. For example, [developmental or social-emotional or mental health screening](https).

Contact the MHCP Provider Call Center with questions at 800-366-5411 or 651-431-2700. Be sure to have your NPI number when calling.

**Minnesota Department of Health (MDH)**

DHS has an interagency agreement with MDH to provide a variety of services including clinical and evidenced-based support for C&TC screening components, training, technical assistance and child health consultation.
**Training**

Prepare and conduct training session presentations for public health and C&TC providers on the screening components and best practices related to implementation. Refer to the [MDH C&TC](https://www.mdh.state.mn.us) website for training and educational opportunities.

- The following in-person trainings are offered by MDH:
  - C&TC Comprehensive Screening Components Training (3-day training)
  - C&TC Refresher Training (7 hours)
  - Best Practices in Well Child Screening – program overview, evidence-based best practices for C&TC screening components and resources for culturally competent care
  - Hearing and Vision Screening - best practices, recent updates and guidelines for referral
  - Developmental and Mental Health Screening - recommended screening instruments, clinical practice implementation and referral resources
  - Customized trainings are available and include such topics as adolescent and young adult, oral health and fluoride varnish, and lead screening

- Free on-line E-Learning trainings such as developmental, lead and oral health screenings
- Coordinate and assist with C&TC-related training needs as requested by CHB or Tribe staff, Head Start, school clinics, tribal providers, public and primary care health clinics in consultation with DHS

**Technical Assistance**

Provide technical assistance to C&TC health care providers, public health agencies, Head Start, tribal providers, C&TC Coordinators, managed care organizations and other eligible service providers on detailed evidenced-based best practice application for all components listed on the periodicity schedule.

**Consultation**

- Assist in establishing the state periodicity schedule and component standards that are evidenced-based or best-practice-based from national health organizations such as the American Academy of Pediatrics, Centers for Disease Control, United States Preventive Care Task Force and others as pertinent to the subject matter.
- Work with DHS and national health professional organizations and educational programs or institutions to build relationships and increase collaboration through
increased communication and the development and implementation of ways to promote C&TC to health care providers.

**C&TC County and Tribe Coordinators**

Each county and participating tribe has a Coordinator available for assistance. Contact information can be found on the [County and Tribe Contact List](#).

**Coordinators:**

- Inform enrolled children and families of the benefits of C&TC
- Send reminders when children are due for age-related screenings
- Assist families needing help with transportation, interpreters and appointment scheduling
- Complete outreach with provider clinics to:
  - Promote C&TC
  - Encourage compliance of program requirements
  - Assist with clinic and provider training needs
- Receive notification and assist families and adolescents who have a referral as a result of the C&TC screening