

**FLORIDA  
MEDICAID**  
A Division of the Agency for Health Care Administration  
*Better Health Care for all Floridians*

CHARLIE CRIST  
GOVERNOR

THOMAS W. ARNOLD  
SECRETARY

March 30, 2010

Via Email

OMB#: 0938-0354  
Office of Information and Regulatory Affairs  
Attention: CMS Desk Officer

Dear CMS Desk Officer:

Thank you for the opportunity to respond to the OMB (#0938-0354) on the "Annual Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services Participation Report," the CMS-416 Report. The following provides recommendations and comments regarding the proposed information:

- Recommend Line 1 (Total Individuals Eligible for EPSDT) specify how to count eligibles. Clarification is requested, should *all* eligibles be counted, even if a child is eligible for only one day, one week, or one month? Florida counts *all* eligibles including those who are eligible for one day, etc.
- Recommend for Line 2a (State Periodicity Schedule) that CMS require *all* states to follow the Bright Futures/American Academy of Pediatrics "Recommendations for Preventive Pediatric Health Care" (Periodicity Schedule) as a quality standard for the Early and Periodic Screening, Diagnosis and Treatment program. This would ensure consistency in the frequency of preventive care visits across *all* states.
- Recommend Line 11 (Total Eligibles Referred for Corrective Treatment) specify how to count referrals. Florida counts eligibles based on the appropriate federally required referral codes. We understand that "follow-up" visits based on specific time periods are also counted as referrals.
- Recommend Line 12a (Total Eligibles Receiving Any Dental Services), 12b (Total Eligibles Receiving Preventive Dental Services), and 12c (Total Eligibles Receiving Dental Treatment Services) include CPT codes in addition to ADA dental codes in order to have a comprehensive overview of all dental services provided to eligibles. For example, Florida's Fluoride Varnish Procedure Code is a CPT code, not a dental (ADA) code.
- Recommend Line 14 (Total Number of Screening Blood Lead Tests) change to count the "unduplicated number of eligibles," rather than "total number of claims" to identify the number of eligibles receiving a blood lead test, rather than the number of tests provided.

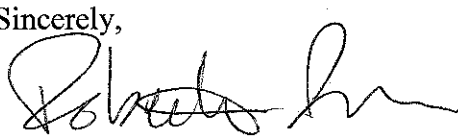


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- Recommend the electronic version of the CMS-416 report use lighter shading on Lines that are calculated (shaded columns) as these lines/columns are difficult to read when printed.

If you have any questions, please contact Anne Boone of my staff by phone at (850) 412-4220, or by email: [Anne.Boone@ahca.myflorida.com](mailto:Anne.Boone@ahca.myflorida.com).

Sincerely,

A handwritten signature in black ink, appearing to read "Roberta K. Bradford". The signature is fluid and cursive, with a large initial "R" and a long horizontal stroke at the end.

Roberta K. Bradford  
Deputy Secretary for Medicaid

RKB/AB/ah