

## Developmental Surveillance and Screening

Recently, Michigan Department of Community Health (MDCH) participated in a Commonwealth Fund-supported national consortium, Assuring Better Child Health and Development (ABCD) Screening Academy, to improve early identification of young children with developmental problems. The Michigan initiative was accomplished through a partnership between MDCH and the Michigan chapter of the American Academy of Pediatrics.

During this initiative, ABCD teams worked with Medicaid pediatric practices to implement standardized developmental screening according to American Academy of Pediatrics (AAP) policy recommendations.

The 2006 AAP *Identifying Infants and Young Children with Developmental Disorders in the Medical Home: An Algorithm for Developmental Surveillance and Screening* policy, recommends developmental surveillance be incorporated at every well-child visit and that practitioners promptly address concerns that occur during surveillance. The policy additionally recommends standardized developmental screening tests be administered at the **9, 18, and 30\* month visits**. According to the policy:

- **Developmental surveillance** is defined as the process for recognizing children who might be at risk for developmental delays;
- **Developmental screening** is the use of a standardized validated tool to identify and refine the recognized risk; and
- **Developmental evaluation** is a complex process aimed at identifying specific developmental disorders that are affecting a child.

The Michigan Medicaid Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) policy also requires developmental surveillance and screening. The policy suggests providers' use a standardized developmental instrument, such as the PEDS, PEDS:DM or Ages and Stages Questionnaire (ASQ) and Ages and Stages Questionnaire Social-Emotional (ASQSE). The policy further states "Developmental screening using an objective, standardized screening tool must be performed following the AAP's 2007 Periodicity Schedule at 9, 18 and 30 months, and any other time there are indications of need."

You are encouraged to implement developmental surveillance and screening in your office to be in compliance with the recommendations from AAP and Michigan's EPSDT policy.

Suggestions for successful practice implementation are to:

- Identify and implement a standardized tool for screening in your practice. (Appropriate screening tools are listed in the attached AAP policy.)
- Implement developmental surveillance and screening practice policies and procedures.

\*Developmental screening can be performed at 24 months of age if a patient may have difficulty returning for the 30 month visit.

- Communicate with office staff and colleagues about the importance of implementing developmental surveillance and screening.
- Screen all children during well child checks and use the standardized developmental screening tool at the 9, 18, and 30\* month visits.
- Refer identified children to Michigan's *Early On*<sup>®</sup> program if developmental delays are found. You may make a referral online at [www.1800earlyon.org](http://www.1800earlyon.org) or call the statewide line at 1-800-Early-On (1-800-327-5966)
- Contact Michigan 2-1-1 for referral resources in your community for children who don't qualify for *Early On*<sup>®</sup>
- Communicate with parents about the importance of developmental surveillance and screening
- Communicate the desire to learn about and discuss parental concerns regarding their child's development.
- Bill appropriately for developmental screening services (see table below)

Services for developmental screening to Medicaid members are payable using the following CPT codes:

CPT Code	Category	Notes
96110	Developmental Screening	Screening tool completed by parent or non physician staff and reviewed by the physician
96111	Developmental/Medical Evaluation	If objective development testing is performed by the physician as an outpatient office visit

Additional codes are available as described in the most current CPT Manual.

For more information:

The AAP Developmental Surveillance and Screening Policy Statement may be accessed at <http://aappolicy.aappublications.org/cgi/reprint/pediatrics;118/1/405.pdf>

The Medicaid EPSDT Policy may be found in section 3 of the practitioner chapter <http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf>

Medicaid practitioner fee screen link (search on procedure codes in table)

[http://michigan.gov/documents/mdch/Practitioner\\_January\\_2009\\_Final\\_261623\\_7.pdf](http://michigan.gov/documents/mdch/Practitioner_January_2009_Final_261623_7.pdf)

Bright Futures Periodicity Table

<http://brightfutures.aap.org/pdfs/AAP%20Bright%20Futures%20Periodicity%20Sched%20101107.pdf>

Questions about this initiative should be directed to Quality Management at 313-324-3744.

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