

## EPSDT and Title V Collaboration to Improve Child Health

### Title V Rules for EPSDT Linkages

This page provides an overview of the relationship between Title V and Medicaid, including the EPSDT program, with a focus on federal law requirements.

Title V of the Social Security Act was enacted in 1935 as a health services safety net for all women and children. Today, the Title V Maternal and Child Health Services Block Grant continues to pursue the goal of improving the health of all mothers and children. Title V is administered by the Health Resources and Services Administration (HRSA).

Between 1967 and 1989, Congress enacted a number of amendments to Title V, adding requirements to work closely with and assist Medicaid in a number of activities. Currently, the Title V law requires that state MCH programs:

- Assist with coordination of EPSDT. [View details](#)
- Establish coordination agreements for with their State Medicaid programs. [View details](#)
- Provide a toll-free number for families seeking Title V or Medicaid providers.
- Provide outreach and facilitate enrollment of Medicaid eligible children and pregnant women. [View details](#)
- Share data collection responsibilities, particularly related to infant mortality [details](#) and Medicaid. [View details](#)
- Provide services for children with special health care needs and disabilities not covered by Medicaid. [View details](#)

**42 USC Section 705(a)(5)(F)(i)** participate in the coordination of activities between such program and the early and periodic screening, under section 1396d(a)(4)(B) of this title (including the establishment of periodicity and content standards for early and periodic screening, diagnostic, and treatment services), to ensure that such programs are carried out without duplication of effort.

**42 USC Section 705(a)(5)(F)(ii)** participate in the arrangement and carrying out of coordination agreements described in section 1396a(a)(11) of this title (relating to coordination of care and services available under this subchapter and subchapter XIX of this chapter).

**42 USC Section 705(a)(5)(F)(iv)** provide, directly and through their providers and institutional contractors, for services to identify pregnant women and infants who are eligible for medical assistance under subparagraph (A) or (B) of section 1396a(l)(1) of [Medicaid] and, once identified, to assist them in applying for such assistance.

(C) Information (by racial and ethnic group) on... the number of such deliveries to pregnant women who were provided prenatal, delivery, or postpartum care [and] the number of such infants who were provided services under this subchapter or were entitled to benefits under the State plan under.. [Medicaid or state Medicaid plans] at any time during the year.

**RESEARCH ON INFANT MORTALITY AND MEDICAID SERVICES Section 6507 of Pub. L. 101-239** provided that: "The Secretary of Health and Human Services shall develop a national data system for linking, for any infant up to age one -(1) the infant's birth record,(2) any death record for the infant, and(3) information on any claims submitted under...[Medicaid] for health care furnished to the infant or with respect to the birth of the infant.

**42 USC Section 701(a)(1)(C)** "to provide rehabilitation services for blind and disabled individuals under the age of 16 receiving benefits under subchapter XVI of this chapter, to the extent medical assistance for such services is not provided under subchapter XIX of this chapter"