

Arizona Early Intervention Program (AZEIP)

AZEIP is the collective effort of private and public programs and community members. AZEIP provides services such as Speech, Occupational and Physical Therapy and other supports to families and children, ages 0-3, at risk of or who have a developmental delay.

Early Periodic Screening, Diagnostic, and Testing Program (EPSDT)

EPSDT is the child health component of Medicaid, which is AHCCCS in Arizona. The purpose of EPSDT is to improve the health of children by covering a medically necessary evaluation and other medical services for members under the age of 21.

University Physicians Health Plans (UPHP) strives to remove barriers to the implementation of EPSDT services for our youngest members who are 0-3 years of age in order to insure that early developmental opportunities are maximized. Call your provider representative or Maternal Child Health at 520-874-3002 for more information.

AZEIP/EPSDT SERVICE COORDINATION REQUIREMENTS

- When the primary care physician (PCP) identifies a member under the age of 21 as having a potential developmental delay, he/she may arrange an evaluation with an in-network provider and prior authorization is not required. Should the PCP arrange an evaluation with an out of network provider, prior authorization is required and medical documentation and continuity of care need, if applicable, is required.
 - Based on the evaluation, medically necessary services can be arranged by the PCP with an in-network provider and prior authorization is not required. Prior authorization is required for out of network providers.
 - Regardless of member's AZEIP status, UPHP will pay for medically necessary services for EPSDT members.
 - According to the AHCCCS/AZEIP agreement, when services are identified for an AZEIP eligible child's Individual Family Service Plan (IFSP), UPHP will fax the PCP the AZEIP EPSDT Service Request Form for approval or denial of the services within two days of receiving it from AZEIP.
 - THE PCP MUST RETURN THE AZEIP EPSDT SERVICE REQUEST FORM WITHIN FIVE (5) DAYS OF RECEIPT.
 - According to Federal law, AZEIP service implementation is required within 45 days of the IFSP origination date. The AZEIP provider and coordinator, parent or guardian and PCP are provided the completed AZEIP Request Form for EPSDT services by UPHP. The denied or the approved type (s) of therapy duration and frequency is included on the form.
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