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WELFARE AND INSTITUTIONS CODE - WIC

DIVISION 9. PUBLIC SOCIAL SERVICES [10000 - 18999.98] (Division 9 added by Stats. 1965, Ch. 1784.)

PART 3. AID AND MEDICAL ASSISTANCE [11000 - 15771] (Part 3 added by Stats. 1965, Ch. 1784.)

CHAPTER 7. Basic Health Care [14000 - 14199.87] (Chapter 7 added by Stats. 1965, 2nd Ex. Sess., Ch. 4.)

ARTICLE 4.12. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services [14149.95- 14149.95.] (Article 4.12 added by Stats. 2024, Ch. 564, Sec. 1.)

14149.95. (a) The department shall prepare written informational materials that effectively explain and clarify the scope and nature of early and periodic screening, diagnostic, and treatment (EPSDT) services that are available under the Medi-Cal program. The informational materials shall use clear and nontechnical language.

(b) (1) The informational materials shall include, but not be limited to, the information required in Section 441.56(a) of Title 42 of the Code of Federal Regulations or its successor.

(2) The informational materials shall include content designed for youth, for purposes of delivery of that content to the beneficiaries described in paragraph (2) of subdivision (d).

(3) The department may standardize the informational materials for use by the department and Medi-Cal managed care plans, as deemed appropriate by the department to implement this section.

(c) (1) The department shall, in consultation with stakeholders, regularly review the informational materials to ensure that the materials are up to date.

(2) To ensure that the informational materials use clear and nontechnical language that effectively informs Medi-Cal beneficiaries, the department shall test the quality, clarity, and cultural concordance of translations of the informational materials with Medi-Cal beneficiaries.

(d) (1) A Medi-Cal managed care plan shall provide to the respective beneficiary who is eligible for EPSDT services, or to the parent or other authorized representative of that beneficiary, as applicable, the informational materials described in this section within a maximum number of calendar days, as specified by the department, after that beneficiary's enrollment in a managed care plan and annually thereafter for beneficiaries who continue to be enrolled with the same Medi-Cal Managed Care Plan. For beneficiaries in fee-for-service Medi-Cal, the Department or its representative shall provide to the respective beneficiary who is eligible for EPSDT services, or to the parent or other authorized representative of that beneficiary, as applicable, the informational materials described in this section within 60 calendar days after that beneficiary's initial Medi-Cal eligibility determination and annually thereafter, for beneficiaries who continue to be enrolled in fee-for-service Medi-Cal.

(2) The department or the Medi-Cal managed care plan, as applicable, shall provide the content designed for youth, as described in paragraph (2) of subdivision (b), to a beneficiary who is 12 years of age or older but under 21 years of age, in accordance with the schedule described in paragraph (1).

(e) For purposes of this section, the following definitions apply:

(1) "EPSDT services" means services covered under subdivision (v) of Section 14132 and that meet the standards set forth in Section 1396d(r) of Title 42 of the United States Code.

(A) In addition to the screening, vision, dental, and hearing services described in Section 1396d(r)(1)-(4) of Title 42 of the United States Code, EPSDT services include such other necessary health care, diagnostic services, treatment, and other measures described in Section 1396d(a) of Title 42 of the United States Code to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not those services are covered under the Medi-Cal State plan, in accordance with Section 1396d(r)(5) of Title 42 of the United States Code.

(B) EPSDT services also include all age-specific assessments and services listed under the most current periodicity schedule by the American Academy of Pediatrics (AAP) and Bright Futures, and any other medically necessary assessments and services that exceed those listed by AAP and Bright Futures.

(2) A service is “medically necessary” if it meets the applicable medical necessity standards set forth in Sections 14059.5 and 14184.402.

(Added by Stats. 2024, Ch. 564, Sec. 1. (AB 2340) Effective January 1, 2025.)