

The Arizona Health Care Cost Containment System (AHCCCS) EPSDT Tracking Forms shall be used by all providers offering care to AHCCCS members under 21 years of age to document age-specific, required information related to EPSDT screenings and visits. Only AHCCCS EPSDT Tracking Forms may be used; paper form substitutes are not acceptable. However, providers may choose to utilize an electronic EPSDT Tracking Form generated through AHCCCS (once available) or the provider's electronic health record system, so long as the electronic form includes all components present on the AHCCCS EPSDT Tracking Form. These components include, but are not limited to:

1. Documentation of comprehensive physical exam (including appropriate weights and vital signs)
2. Age-appropriate screenings (vision, hearing, oral health, nutrition, developmental, nutritional, tuberculosis (TB) and lead)
3. Developmental surveillance
4. Anticipatory guidance (Age Appropriate Education and Guidance)
5. Social-emotional health (Behavioral Health) surveillance
6. Age-appropriate labs and immunizations, and
7. Medically necessary referrals including those to the member's dental home starting at 1 year of age, or sooner as needed, for routine biannual examinations.

Refer to AMPM Chapter 400 for EPSDT responsibilities and services.

Contractors are required to print two-part carbonless EPSDT Tracking Forms (a copy for the member's medical record and a copy for providers to send to the Contractor's MCH/EPSDT Coordinator) and distribute these forms to their contracted providers. Providers may also choose to print the EPSDT Tracking Form from the AHCCCS website.

A copy of the completed EPSDT Tracking Form(s), signed by the clinician, should be placed in the member's medical record. Depending on the member's enrollment status, an additional distributed copy of the EPSDT Tracking Form may be required, as detailed below:

1. For members enrolled with a Contractor: A copy of the completed and signed form shall be sent to that Contractor.
2. For AHCCCS Fee-For-Service members [e.g., enrolled in the American Indian Health Program (AIHP)]: The provider shall maintain a copy of the EPSDT Tracking Form in the member's medical record, but does not need to send a copy elsewhere.

Contractors and providers may reproduce EPSDT Tracking Forms as needed. All others may reproduce the forms with permission of AHCCCS via an approved written request directed to:

AHCCCS  
Division of Health Care Management  
CQM/Maternal and Child Health 701 E.  
Jefferson, Mail Drop 6700  
Phoenix, AZ 85034  
(602) 417-4410

**NOTE: The Centers for Medicare and Medicaid Services require AHCCCS to provide specified services to our EPSDT population. These EPSDT Tracking Forms have been designed to ensure that needed services are performed, and that our members are provided an opportunity to receive preventive care. Do NOT alter or amend these forms in any way without discussion with our Maternal and Child Health Manager at the address above. Contact information for AHCCCS Contracted health care plans may be found at [www.azahcccs.gov](http://www.azahcccs.gov).**