

ePA Help Sheet – EPSDT Psychiatric Services

Request Type	ePA Module	Request /Update Type	Place of Service	Service Type	Code Types Accepted	Forms to be submitted with ePA ¹
EPSDT Extended Care Unit New Request	Initial Authorization Request	EPSDT – Extended Care Units	EPSDT	Psychiatric	HCPCS DSM CPT	N/A
EPSDT Chemical Dependency Outpatient New Request	Initial Authorization Request	EPSDT – Chemical Dependency Inpatient	EPSDT	Psychiatric	HCPCS DSM CPT	N/A
EPSDT Chemical Dependency Inpatient New Request	Initial Authorization Request	EPSDT – Chemical Dependency Outpatient	EPSDT	Psychiatric	HCPCS DSM CPT	N/A
EPSDT – Out of State Facility New Request	Initial Authorization Request	EPSDT – Psych Out of State Facility	EPSDT	Psychiatric	HCPCS DSM CPT	Diligent Search List and MD Letter
EPSDT Extended Care Unit Recertification	Case Updates	EPSDT – Extended Care Units (EDU in-state)	N/A	N/A	HCPCS DSM CPT	N/A
EPSDT Chemical Dependency Outpatient Recertification	Case Updates	EPSDT – Chemical Dependency Out-Patient Programs	N/A	N/A	HCPCS DSM CPT	N/A
EPSDT Chemical Dependency Inpatient Recertification	Case Updates	EPSDT Chemical Dependency In-Patient Programs	N/A	N/A	HCPCS DSM CPT	N/A
EPSDT – Out of State Facility Recertification	Case Updates	EPSDT – Out of State	N/A	N/A	HCPCS DSM CPT	N/A

¹Not all forms listed in this column are required for each request. Providers are responsible to submit complete request packets using the appropriate forms for the type of request they are submitting. Providers should maintain in the provider's or recipient's record any forms required by the Kentucky Medicaid regulations. Although a form may not be required to be submitted with an ePA request, the Department for Medicaid Services may require original paper copies of the form for audit purposes.