1931 MEDICAL EXAMINATIONS

Chapter: Services for Children, Youth, and Families
Section: Title XX

New Hampshire Division for Children, Youth and Families Policy Manual
Policy Directive: 06-04
Effective Date: 06-04
Approved:

Related Statute(s): RSA 169-C, and RSA 170-G
Related Admin Rule(s):
Related Federal Regulation(s):
Related Form(s): FORM 2220
Bridges’ Screen(s) and Attachment(s):

Purpose
To define the purchased, Title XX service specification for Medical Examinations.

Definitions
“Medical Examinations” means the provision of specialized medical examinations by Child Abuse Referral Evaluation (CARE) network physicians to help determine if children have been abused, neglected, or exploited.

“Service Code” is AA.

“Service Population” means children who are alleged to have been abused, neglected, or exploited and require specialized medical examinations to diagnose difficult conditions, such as serious sexual abuse, failure to thrive, Munchausen’s Syndrome by Proxy, and suspicious bone fractures.

“Service Unit” means one (1) examination.

Policy
Provider Qualifications/Requirements
I. Service providers must be physicians who are members of the Child Abuse Referral Evaluation (CARE) network, as organized by the NH Pediatric Society.

II. The service provider must submit to DCYF a written report within 7 days after the examination is completed.

III. The examination report must include:
   A. The reasons for the referral;
   B. Significant medical history of the child and family;
   C. Documentation of the child’s current injuries and conditions;
   D. Medical laboratory test ordered and the results of the tests;
   E. Interpretation of laboratory results; and
   F. Impressions and treatment recommendations.
Service Provision Guidelines
I. Service is to be authorized at the time of the assessment.

II. Prior to authorizing an examination, the CPSW must:
   A. Obtain the parent’s or legal guardian’s permission, or
   B. Obtain protective custody or protective supervision of the child for the purpose of the examination.

III. Prior to authorizing an examination, the CPSW must, in addition to part II, obtain the approval of the Supervisor.

IV. The examination is to be used to diagnose difficult conditions, such as serious sexual abuse, failure to thrive, Munchausen’s Syndrome by Proxy, and suspicious bone fractures.

V. Medical Examinations service is not to be used as treatment of the child.

VI. The CPSW may request, as part of the cost of the examination, the presence of the physician at a court hearing to testify on the results and interpretations of findings.

VII. If a child in an open service case needs a specialized medical examination, the CPSW must obtain a court order and authorize Medical (ME) service. CARE network physicians may be seen for the exams via ME service, if prior approval is obtained from the Supervisor.

VIII. If abuse or neglect is again alleged to a child in an open case, a protective assessment must be conducted. The case must be referred to the Assessment Unit.

IX. Current CARE network physicians are listed in the “CARE Network Pamphlet” (Form 2220).

Payment Procedures
I. The CPSW must:
   A. Authorize the service via the “Service Authorization” on NH Bridges;
   B. Enter the child’s name, date of birth (if known), and identification number; and
   C. Forward the “Invoice” generated by NH Bridges to the service provider.

II. The service provider must:
   A. Complete the “Actual Service Provided” section of the “Service Authorization;”
   B. Attach an itemized statement for the service; and
   C. Forward the “Service Authorization” to the Supervisor for approval who will forward it to DHHS Bureau of Data Management for processing.

Practice Guidance
What is the Service Rate for this Service?
- Refer to Item 2700 Rates (Fiscal Management Chapter, Rates Section) for current rate.