



Banner
University Health Plans

EPSDT / Well-Child Visits – Tracking Forms

In accordance with AHCCCS policy [*AMPM Policy 430 Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services, Attachment E – AHCCCS EPSDT Tracking Forms*] – All providers offering care to AHCCCS members under 21 years of age, ***MUST*** use the AHCCCS EPSDT Tracking Forms to document age-specific, required information related to the EPSDT / Well-Child screenings and visits.

Alternatively – The provider’s Electronic Health Record may be used, so long as it includes ALL components present on the age-specific AHCCCS EPSDT form.

- **To download EPSDT Tracking forms**, navigate directly to the AHCCCS website at: www.azahcccs.gov → shared → Medical Policy Manual → 430_AttachmentE
Or, click on the link [AHCCCS EPSDT Well-Child Visit Forms](#).
- **For each EPSDT/Well-Child visit, a copy of the completed and signed (by the clinician) EPSDT Tracking Form (or appropriate EHR), must be:**
 - **Placed in the member’s medical record AND**
 - **Sent to the member’s Health Plan**

Timely submission of EPSDT/Well-Child visit forms is very important to member care coordination. Submitting the visit forms (or copy of suitable EHR equivalent) to the Health Plan soon after the well-child visit allows us to:

- Outreach to members and caregivers, evaluate for and mitigate potential barriers to care
- Identify, follow-up and facilitate referrals initiated during the well-child visit.

Submitting EPSDT / Well-Child Visit Forms

There are three easy ways to submit your EPSDT forms or EHRs after a visit.

Secure email: BUHPEPSDTForms@BannerHealth.com

Secure Fax: (5 2 0) 8 7 4 – 7 1 8 4

US Mail: Banner University Health Plans

Attn: EPSDT

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