

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF TEXAS
PARIS DIVISION

LINDA FREW, et al.,
Plaintiffs,

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v.

ALBERT HAWKINS, et al.,
Defendants.

CIVIL ACTION NO. 3:93CV65
SENIOR JUDGE WILLIAM
WAYNE JUSTICE

CORRECTIVE ACTION ORDER:
HEALTH CARE PROVIDER TRAINING

Decree References:

¶107: “Training at Professional Schools Defendants will provide information and facilitate ongoing training about Medicaid and EPSDT at all relevant professional schools in Texas.

‘Relevant professional schools’ include all schools that train health care providers who could serve EPSDT recipients. The purpose of this training will be to:

- interest students in serving EPSDT recipients,
- inculcate in students a sense of ethical or social obligation to serve EPSDT recipients,
- show students how to apply to become Medicaid and EPSDT providers, and
- explain how the Medicaid and EPSDT programs work and how to get help with problems.”

¶108: “EPSDT Training Associated with Other High Caliber Training. Defendants will make staff available to participate in ongoing training in conjunction with appropriate professional training. ‘Appropriate professional training’ means training about issues that are relevant to the provision of services to EPSDT recipients, such as how to conduct a medical check up for a teenager or how to conduct a dental check up for an infant. ‘Appropriate professional training’ will also be of a high caliber to encourage providers to attend.”

See also Decree ¶¶ 104-06, 109-120, 122-142.

Citation for Finding of Decree Violation: *Frew*, 109 F.Supp.2d at 658-660.

IT IS ORDERED:

- Defendants will provide on-line continuing professional education to Medicaid-enrolled health care providers, and particularly those who take care of children. The first on-line module is already in place and in use. It addresses recent changes in screening for newborns. All 16 modules will be online and available for use no later than August of 2007. In their October, 2007 quarterly report, Defendants will report on the status and utilization of each of the modules.
- Data in the quarterly report will include, to the extent possible, and depending on the way the trainee identifies his or her specialty or sub-specialty in the online registration, the number of health care providers of various types (pediatrician, family practice doctor, physician assistant, nurse, pharmacist, etc.) in each region who completed each of the modules.
- Defendants will assess the current practices in Texas dental schools for training of general dentists to care for children 1 to 3 years of age. To the extent possible, dependent on dental school cooperation, Defendants, in consultation with the dental schools and dental professional organizations, will implement a program in all areas of the state to train licensed general dentists to provide dental checkups for children 1 to 3 years of age. Defendants will arrange for this training as expeditiously as possible while complying with state and federal law concerning contracts of this type. If Defendants choose to arrange the training with an entity to which the contracting laws do not apply, Defendants will begin the training no later than nine months after entry of the order. Beginning no later than six months after the training begins, Defendants will include with their quarterly monitoring reports information about dates and locations of these training events, and how many dentists attend each. Defendants will also track and report how

many dentists bill for dental services to children age three and under after attending the training. The reports will include the number of children age three and under who receive dental checkups from the newly trained dentists, and the number of children of this age range who receive other dental services from them.

- Training required by this corrective action plan and/or the decree will be offered to providers in conjunction with appropriate provider groups, such as the Texas Medical Association, Texas Dental Association, county medical societies, professional nursing associations, etc. To the maximum extent possible it will be offered under circumstances that permit providers to receive continuing professional education credit for completing it. However, individual providers may choose alternate means of completing the training.
- All provider training events required by this corrective action plan and/or the decree will provide an opportunity for feedback from providers about the subject matter and methodology of the training. Beginning in 2008, Defendants will compile this feedback and submit a summary of it to the Court and the Plaintiffs annually as an exhibit to their October quarterly monitoring reports.
- Defendants will report the number and percent of Medicaid enrolled health care providers who receive training required by the decree. Beginning in 2008, Defendant will report this information to the Court and to Plaintiffs in summary format on an annual basis with an exhibit to the October quarterly reports. To the extent possible, dependent on the way the trainee identifies his or her specialty or sub-specialty in the online registration, the report will be broken down into appropriate groups of professionals, for example, pediatricians, family practice physicians, various specialist physicians, physician assistants, nurse practitioners whose

licensure permits them to care for class members, dentists, pediatric dentists, pharmacists, mental health professionals, etc. Defendants will reassess this issue on an annual basis.

- To the extent consistent with applicable state and federal law and with other contracts, Defendants will recognize providers who complete training about topics covered in this and other Corrective Action Orders and in the Consent Decree. At Defendants' option, this recognition may include notations on Defendants' website(s), in online or printed provider directories, and/or other locations Defendants may select.