Table 1: Evidence Supporting the Importance of Availability of Care for Children Needing Treatment or Counseling Services

Type of evidence	Key findings	Level of evidence (USPSTF ranking*)	Citation(s)
Clinical Guideline	The EPSDT benefit for Medicaid-enrolled children provides that if the screening exam warrants it, any necessary referral must made without delay. Further, states are required to provide any additional health care services that are coverable under the Federal Medicaid program and found to be medically necessaryregardless of whether the service is covered in a state's Medicaid plan.	111	Early and Periodic Screening, Diagnosis and Treatment. Medicaid.gov. <u>http://www.medicaid.gov/Medicaid-CHIP-</u> <u>Program-Information/By-</u> <u>Topics/Benefits/Early-and-Periodic-</u> <u>Screening-Diagnostic-and-Treatment.html</u> . Updated June 17, 2014. Accessed July 9, 2014.
Descriptive Study	The 50 <sup>th</sup> percentile for age of onset for a variety of DSM-IV conditions is 14 years of age, and the 75 <sup>th</sup> percentile for age of onset is 24 years of age.	111	Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. <i>Arch Gen</i> <i>Psychiatry</i> 2005; 62:593-602.
Descriptive Study	Provision of mental health care services varies greatly for Medicaid-eligible children within the state of Washington.	111	Ellis WR, Huebner C, Vander Stoep A, Williams MA. Washington state exhibits wide regional variation in proportion of Medicaid- eligible children who get needed mental health care. <i>Health Aff</i> 2012; 31(5): 990-999.
Descriptive Study	More than three times as many physicians have reported difficulty in referring children in Medicaid and CHIP to specialty care compared with privately insured children regardless of physician type and geographic location.	111	United States Government Accountability Office (GAO). MEDICAID and CHIP: Most physicians serve covered children but have difficulty referring them for specialty care, GAO.gov. <u>http://www.gao.gov/assets/330/320559.pdf</u> . June, 2011. Accessed July 9, 2014.

Note: USPSTF criteria for assessing evidence at the individual study level are as follows: 1) Properly powered and conducted randomized controlled trial (RCT); well-conducted systematic review or meta-analysis of homogeneous RCTs. II) Well-designed cohort or case-control analytic study. III) Opinions of respected authorities, based on clinical experience; descriptive studies or case reports; reports of expert committees.