Table 3. Evidence Supporting the Importance of Access to Outpatient Specialty Care for Children

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.	III	Medicaid.gov. Early and Periodic Screening, Diagnosis and Treatment. Updated June 17, 2014. Available at: http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Early-and-Periodic-Screening-Diagnostic-and-Treatment.html ; accessed: September 1, 2015.
Descriptive Study	The Data Resource Center for Child and Adolescent Health report that approximately 20% of children need to see a specialist in any given year.	III	Child and Adolescent Health Measurement Initiative (CAHMI). Data Resource Center for Child & Adolescent Health; Specialists are doctors like surgeons, heart doctors, skin doctors, psychiatrists etc. During the past 12 months did you or (child's name)'s personal doctor or nurse think that he/she needed to see any specialist doctor or doctors? (S5Q09). Available at: http://www.childhealthdata.org/browse/survey/results?q=627&g=24 ; accessed September 1, 2015.
Descriptive Study	One third of primary care providers reported difficulty in referring Medicaid/CHIP-enrolled children to specialty care compared with only 1% for privately insured children. The disparity in referral difficulties persisted regardless of physician type and geographic location.	III	United States Government Accountability Office (US GAO). Medicaid and CHIP: Most Physicians Serve Covered Children But Have Difficulty Referring Them for Specialty Care. GAO-11-624; June 2011. Available at: http://www.gao.gov/assets/330 /320559.pdf; accessed September 1, 2015.
Descriptive Study	In this study documenting access to care for Medicaid managed care enrollees, 39% of specialists listed as being in a managed care plan network were found to not participate in that plan.	III	United States Department of Health and Human Services (US HHS), Office of Inspector General. Access to Care: Provider Availability in Medicaid Managed Care. OEI-02-13-00670; December 2014. Available at:

Note: USPSTF criteria for assessing evidence at the individual study level are as follows: I) 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.