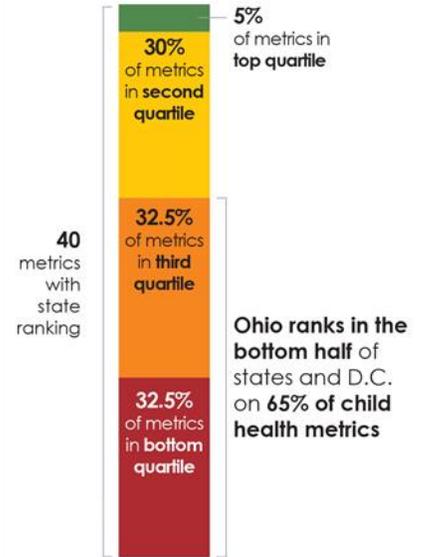
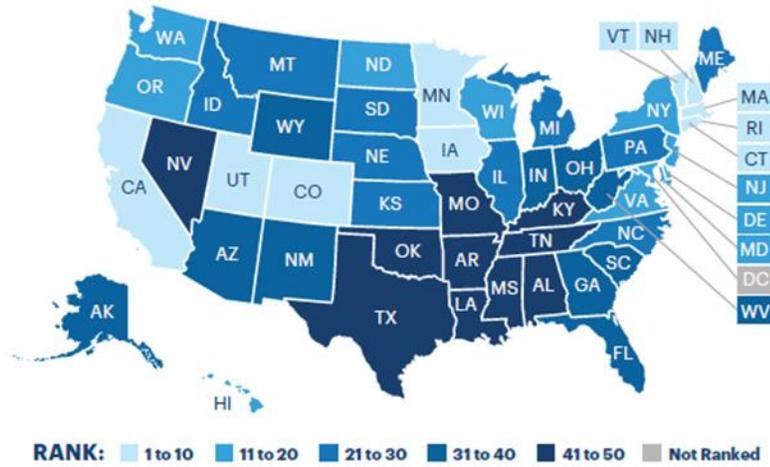


Mike DeWine, Governor
Jon Husted, Lt. Governor

Maureen Corcoran, Director

HEALTHIEST STATES FOR WOMEN, INFANTS AND CHILDREN



Ohio does not fare well on standard measures of pediatric health, as summarized by America's Health rankings and the measures from the Health Policy Institute of Ohio.

Budget Impact

The Ohio Department of Medicaid proposes to invest \$12.0 million (\$3.6 million state GRF) over the biennium to increase wellness for children in its Medicaid program.

Background

Ohio's Medicaid program covers health services for 1.2 million low-income children and youth. Current performance for key pediatric Healthcare Effectiveness Data and Information Set (HEDIS) measures highlight Ohio's status in the 25-50th percentile across a wide range of childhood health metrics, including the following:

- » 57.9 percent of infants less than 15 months old receive well checks; and
- » 71.2 percent of children 3 to 6 years old receive well checks; and
- » 59 percent of young children receive appropriate lead testing.

Pediatricians have long understood the need for coordinating care and developed the original patient-centered medical home framework. Ohio has invested in this type of framework through our Comprehensive Primary Care (CPC) program, which incentivizes providers to meet desired standards of access and quality. CPC practices that

meet additional criteria can receive a bonus for controlling total cost of care. CPC serves as a good foundation to improve children's health, but it is not enough.

Policy Proposal

Currently, 650,000 children, reflecting approximately half of all the children in the Medicaid program, are receiving care through CPC practices. Refining this model of care to honor the preventive services required for the healthy growth and development of children and youth paves the way for every family to enjoy opportunities that come with good health. Ohio Medicaid proposes the development of a child-centric option for pediatric CPC practices to:

- » Receive an enhanced monthly rate in exchange for practice-wide engagement in pediatric-specific activities, such as routine screening for adverse childhood events and issuing preventive behavioral health guidance.
- » Focus on pediatric-specific measures, such as appropriate immunizations and lead screening.

Medicaid managed care plans will play an important role in childhood wellness and population health management by:

- » Partnering with CPC practices to provide outreach to families whose children have been unable to receive needed services and facilitating visits by assisting with scheduling and eliminating transportation barriers.
- » Incentivizing alternative settings of care, including schools, through alternative payment models or other contracting arrangements.
- » Ensuring the highest-risk children do not lose eligibility by monitoring and addressing redetermination challenges, thereby ensuring continuity of care regimens that minimize hospitalizations and other disruptions to school and normal growth and development.
- » Collecting and meaningfully using race, ethnicity, language, and social determinants of health data to identify and reduce disparities in health care access, services and outcomes.