

Whole Child Health Alliance Quarterly Resource Scan | Q2

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About the Quarterly Resource Scan

The Whole Child Health Alliance ("Alliance") envisions a future in which all children can experience optimal health and reach their full potential. To achieve this vision, we believe that organizations that pay for and provide services for children must coordinate and collaborate to meet the developmental, social, physical, and mental health needs of children and youth – which includes supporting the development of positive relationships between children and youth and their caregivers.

One key strategy to advance this vision is to build out the concept of whole child health by researching, identifying and describing the key elements of whole child health. The goal of the Quarterly Resource Scan is to catalog new research, analysis, guidance and tools that advance the key elements of whole child health. By doing so, we aim to enhance our members' understanding of the latest policies and practices that advance whole child health, which will, in turn, inform the Alliance's priorities and strategies.

Scope

The Quarterly Resource Scan will be curated to include publications that discuss policies and/or practices that advance the <u>Key Elements of Whole Child Health</u> or other topics that are closely related to whole child health (e.g., child-related Medicaid/Children's Health Insurance Program (CHIP) policy). The Quarterly Resource Scan will include peer-reviewed studies, policy reports and analyses, case studies, relevant toolkits, and selected policy guidance released by federal agencies – all with relevance to whole child health. The Quarterly Resource Scan will not include federal or state legislation or press releases relevant to whole child health. Those resources will be included in the Alliance's quarterly newsletter.



Resources

Policy Briefs

<u>State Use of Section 1115 Demonstrations to Support Health-Related Social Needs of Pregnant and</u> <u>Postpartum Women, Infants, and Young Children</u>

Allexa Gardner, MPP, Tanesha Mondestin, MS, Nancy Kaneb, et al. Georgetown University McCourt School of Public Policy

This report analyzes how states have used Medicaid section 1115 waivers to cover health-related social need services and supports for pregnant and postpartum individuals and children. As of June 2024, fifteen states have approved or are in the approval process for section 1115 waiver requests to cover housing services for pregnant or postpartum individuals and young children that meet eligibility criteria (approved: AZ, AR, MA, NC, NJ, NY, OR, WA; pending approval: CA, CT, HI, IL, PA, RI, VT). Eleven states have approval or are in the approval process to provide nutrition supports for pregnant and postpartum individuals or young children that qualify (approved: DE, MA, NC, NJ, NY, OR, WA; pending approval: HI, IL, NM, PA).

Changes to the Child and Adult Core Measure Sets to Advance Equity

Elizabeth Lukanen, MPH and Lacey Hartman, MPP State Health and Value Strategies

This brief summarizes the new state requirements for reporting a subset of the Child and Adult Core Set measures by race and ethnicity, sex and geography, which will be used to measure quality of care for Medicaid and CHIP enrollees at the national and state level. These requirements aim to provide stakeholders with data to inform policies and practices that promote health equity.

<u>Considerations for Alternative Decision-Making When Transitioning to Adulthood for Youth With</u> Intellectual and Developmental Disabilities: Policy Statement

Renee M. Turchi, MD, MPH, FAAP, Dennis Z. Kuo, MD, MHS, FAAP, et al. May 2024 American Academy of Pediatrics

This policy statement outlines recommendations to support youth with intellectual and developmental disabilities as they transition into adulthood. The authors' recommendations focus on how patient- and family-centered, integrated care can be leveraged to support transition planning.

Medicaid Pediatric Subspecialty Care

Jennifer K. Saper, MD, MS Jean L. Raphael, MD, MPH, Lisa J. Chamberlain, MD, May 2024 MPH and James M. Perrin, MD *Nature*

This article discusses the implications of low Medicaid/CHIP reimbursement rates on pediatric subspeciality care, including its impact on health equity. The article highlights three policy recommendations from the American Academy of Pediatrics' recent Medicaid/CHIP policy statement, which calls for Medicaid/CHIP reform to create a stronger health care system for children. The highlighted recommendations include:

- Implementing automatic enrollment in Medicaid at birth with an option to opt-out of Medicaid enrollment;

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- Creating standardized enrollment, eligibility, scope of benefits and payment for providers across all states: and
- Increasing Medicaid payment rates so that they are comparable to Medicare payment rates.

Building a Health Equity Focus into Value-Based Payment Design: Approaches for Medicaid Payers

Anne Smithey, MPH and Shilpa Patel, PhD Center for Health Care Strategies

This brief explains how payers can incorporate health equity into their Medicaid value-based payment models. Key recommendations for incorporating health equity include:

- Engaging community members in model design;
- Embedding health equity in the model requirements; -
- Creating performance-based payments for reducing health disparities;
- Prioritizing safety net provider participation;
- Collaborating with plans and providers to create a data strategy; and -
- Exploring adjusting for social risk factors; and providing technical assistance.

The National Academies of Sciences, Engineering, and Medicine Recommendations on Medicaid Parity and Future of Pediatric Subspecialty Workforce

Satyan Lakshminrusimha, MD, MBBS, David A. Lubarsky, MD, MBA, FASA, Rhae Ana Gamber, MPH, et al.

The Journal of Perinatology

This article discusses the importance of Medicaid reimbursement in neonatal-perinatal medicine and how the National Academies of Science, Engineering, and Medicine's recent policy recommendations related to Medicaid reimbursement would promote the retention of neonatologists. NASEM recommended that pediatric subspecialists should receive enhanced reimbursement through high work-relative value units which account for the time and detail needed to provide care.

Aligning State Agencies to Support Better Health and Well-Being in Early Childhood and Across the Lifespan

Gretchen Hammer, MPH, Armelle Casau, PhD and Lauren Scannelli Jacobs, MPA

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Center for Health Care Strategies

This brief describes the Aligning State Systems for Improved Health and Well-Being Outcomes framework, which the Center for Health Care Strategies developed to guide collaborative change to support the healthy growth and development of young children. The brief describes how states can implement the framework to better serve children and families.

Medicaid Opportunities to Support Youth Transitioning from Incarceration

Liz Buck, MPA and Ruby Goyal-Carkeek, MBA Center for Health Care Strategies

This "policy cheat sheet" outlines the implications of provisions of the Consolidated Appropriations Act of 2023 that will permanently require states to expand Medicaid to cover services for youth who are incarcerated. Before these provisions, the inmate exclusion policy prevented Medicaid funding from being used to cover health care services for individuals who were incarcerated in public institutions. The authors note that the policy resulted in adverse health outcomes and poor coverage



and care transitions for youth who were incarcerated. By January 2025, all states must cover screening or diagnostic services that are deemed "medically necessary" thirty days prior to release, implement targeted case management (i.e. development of a care plan and create updated enrollment guidelines), and follow updated enrollment guidelines.

Research and Reports

Convergence Collaborative on Social Factors of Health Discovery Report.

Convergence

The *Convergence Collaborative on Social Factors of Health Discovery Report* highlights findings from interviews with cross-sector stakeholders to identify a pathway for policy reform that addresses upstream social factors that influence health. The areas of focus that the stakeholders identified were improving system integration, financing approaches, expanding data and evaluations, and building the workforce.

Putting Principles Into Action: Building an Early Relational Health Ecosystem

Charlyn Harper Browne, MA, PhD, Cailin O'Connor, MS. David Willis, MD, et al. April 2024 Center for the Study of Social Policy

This report outlines the implications of the ten principles of the early relational health model, which combine evidence-based science with experience-informed ideas, values and practices to elevate the significance of positive child-caregiver relationships that promote child health and wellbeing. The report outlines actionable implications of the principles of early relational health, including but not limited to:

- Positive caregiver-child interactions can have immediate and long-term impacts;
- Simple interactions can be good early relational experiences;
- Research and practice can be strengthened by integrating family experience and cultural wisdom;
- Early relational health embraces a diversity of practices and knowledge; and
- A broad range of professionals and community members can promote early relational health.

Peer Reviewed Articles

Medicaid Policy Changes are Set to Allow Coverage for Some Health Services for Youth in Custody: What Should Pediatricians Know?

Tess Kelly, MPA, Joshua Dankoff, JD, MDP, Arash Anoshiravani, MD, MPH, et al.

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Nature

This article explores the impact of recent policy and administrative changes that expand Medicaid coverage to youth who are incarcerated. It also calls on pediatricians to support the implementation of these changes across the U.S. The comments in this article align with the <u>American Pediatric</u> <u>Society 2024 Issue of the Year, "Increasing Accessing to Quality Health Care for Youth in Custody.</u>

Differences in Healthcare Utilization in Children with Developmental Disabilities Following Value-**Based Care Coordination Policies**

Li Huang, PhD and Jarron M. Saint Onge, PhD Journal of Healthcare Management

This study assesses the changes in healthcare utilization for children with developmental disabilities after the implementation of value-based care coordination policies. The study found that implementation of care coordination programs was associated with increased utilization of low-cost care and no increase in high-cost ED and inpatient visits for children with developmental disabilities. The findings demonstrate the importance of support care coordination programs for children with developmental disabilities and potentially others with complex chronic conditions. The investigators recommend continued research on this topic over a longer period.

Improving Health Equity and Outcomes for Children and Adolescents: The Role of School-Based Health Centers (SBHCs)

Khalida Itriyeva, MD Current Problems in Pediatric and Adolescent Health Care

This article outlines the benefits of school-based health centers. School-Based Health Centers (SBHCs) provide primary care, behavioral health services, reproductive health services, nutrition services, and other services to students in the school setting. SBHCs are a cost-effective way to deliver health care services and advancing health equity.

Federal Rules, Reports, and Guidance

MACPAC Report to Congress on Medicaid and CHIP

Medicaid and CHIP Payment Access Commission (MACPAC)

In its 2024 report to Congress, MACPAC covers several key topics including improving the transparency of Medicaid and CHIP financing, optimizing state Medicaid agency contracts, the enrollment trends of Medicare savings programs, and Medicaid demographic data collection.

Final Rule: Medicaid Program; Ensuring Access to Medicaid Services

Centers for Medicare and Medicaid Services

The Ensuring Access to Medicaid Services rule creates "national standards that will allow people enrolled in Medicaid and CHIP to better access care when they need it and also strengthens home and community-based services" (Fact Sheet). The final rule aims to advance access and quality of care and improve health outcomes for Medicaid managed care and fee-for-service beneficiaries. It also aims to improve managed care delivery systems, including home- and community-based services.

Final Rule: Medicaid Program; Medicaid and Children's Health Insurance Program Managed Care, Access, Finance, and Quality

Centers for Medicare and Medicaid Services

The Medicaid and CHIP Managed Care Access, Finance and Quality rule aims to "improve access to care, accountability, and transparency for the more than 70 percent of Medicaid and CHIP beneficiaries who are enrolled in a managed care plan" (Fact Sheet). The final rule:

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• Strengthens standards for timely delivery of care;

- Enhances quality, fiscal and program integrity for state directed payments;
- Specifies the scope of in lieu of service and setting (ILOSs) to address health-related social needs;
- Specifies medical loss ratio reporting requirements; and
- Establishes a quality rating system for Medicaid and CHIP managed care plans.

National Strategy for Suicide Prevention 2024

U.S. Department of Health and Human Services

The 2024 National Strategy for Suicide Prevention builds on the 2012 National Strategy to address gaps in the field of suicide prevention and promote a coordinated and comprehensive approach to suicide prevention. The National Strategy addresses health equity, youth and social media, as well as the intersection of suicide and substance use. The Plan covers four strategic directions:

- Community-based suicide prevention;
- Treatment and crisis services;
- Surveillance, quality improvement, and research; and
- Health equity in suicide prevention.

Tools

Partnering with Dads to Enhance Pediatric Care

Hannah Gears, MSW and Louis Mendoza

Center for Health Care Strategies

Engaging fathers in their child's health has the potential to improve child health outcomes, yet traditionally, the child health system has focused on mother-and-child relationship. This tool provides tips for pediatric providers to involve fathers in their children's health care, which can improve the health and well-being of children.

Podcasts

Medicaid Leadership Exchange: How Medicaid Can Better Support Families of Children with Special Health Care Needs

Center for Health Care Strategies

In this podcast episode, Maureen Corcoran (Medicaid Director, Ohio Department of Medicaid), Sala Webb, MD, FAPA, DFAACAP (Chief Medical Officer, Aetna Better Health of Ohio, OhioRISE), and Mark Butler (Parent Advocate, OhioRISE Advisory Council Member) discuss how Medicaid agencies can better serve children with special healthcare needs and their family members. The episode highlights the need for multi-sector partnerships ad increased communication between agencies and beneficiaries.

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CHILDREN'S HEALTH.



Well Beyond Medicine Podcast: The KIDS Health Act: Whole Child Health for the Nation (<u>Part 1</u>; <u>Part 2</u>)

Nemours Children's Health

June 2024

This podcast series focuses on the Kickstarting Innovative Demonstrations Supporting (KIDS) Health Act (<u>H.R 3805</u>; <u>S.R 1769</u>), a bipartisan and bicameral bill that would establish a holistic approach to children's health care by integrating mental and physical health for children who are eligible for Medicaid/CHIP. This podcast series features the House and Senate co-sponsors Congresswoman Lisa Blunt Rochester (D-DE), Congressman/Dr. Michael C. Burgess (R-TX), Senator Tom Carper (D-DE), and Senator Dan Sullivan (R-AK).

Blogs

Using Medicaid to Address Young People's Mental Health Needs in School Settings

Laura Conrad, MSW, Megan Lee, MA, LP, and Zainab Okolo, MA, PhD The Commonwealth Fund

April 2024

This blog post discusses the benefits of school-based mental health programs, the barriers that schools face as they implement school-based mental health programs, and opportunities to strengthen youth mental health. Schools have noted the significant level of administrative oversight, complex billing processes, consent requirements, and the shortage of behavioral health providers can be barriers to implementing school-based mental health services. The authors recommend that states direct targeted funding to smaller schools and facilitate intersectoral collaboration, among other recommendations.