Participate.
Show Support.
Stay Informed.

Developmental Screenings & Ohio’s EPSDT Program
• Non-partisan

• Multi-Issue Focus

• Lead in Children’s Health, Oral Health, Youth Development, & other issues
- Packard Foundation Grant
- Maximize Screenings
- Improve Care processes
- Voices - 1 of 5 pilot states
Produce recommendations about ways to improve Ohio’s EPSDT program to:

• Maximize developmental screenings
• Ensure that parents & caregivers are focus of care processes
How does Ohio Compare to Other States?

2014 Screening Ratio

Total Screens Received / Total Expected Screens

44th out of 45 States
How does Ohio Compare to Other States?

2014 Participant Ratio

Total Eligibles Receiving at least 1 Initial or Periodic Screen/Total Who Should Be Receiving

44th out of 45 States
Early Focus

- Developmental Screenings take place in context of the complex, multifaceted EPSDT program
- Discussions will touch on a broad range of issues, systems & processes
- **Central focus is still limited to 2 project goals**
  - Maximize developmental screenings
  - Ensure that parents & caregivers are focus of care processes
Process

• Three Groups
  • Interagency, Stakeholder, HUB group

• Timeline
  • 3 to 4 meetings/group by mid August
  • Recommendations – Late September
Interagency Group

- Medicaid,
- Health,
- Mental Health,
- Education,
- Job and Family Services,
- Youth Services,
- Department of Developmental Disabilities
- Family and Children First Councils,
Stakeholder Group

- American Academy of Pediatrics – Ohio Chapter,
- Ohio Association of Community Health Centers,
- Ohio Children’s Hospital Association,
- JFS Directors Association,
- Ohio Association of County Boards of Developmental Disabilities,
- Ohio Association of County Behavioral Health Authorities; Ohio Family and Children’s First Council Association,
- Ohio Council of Behavioral Health Providers,
- Ohio Association of Community Health Plans.
Scope of Discussions

• How EPSDT is currently communicated to Ohio families

• What Ohio’s EPSDT program covers for families vs what Fed regs allow covered

• What families know they can access through the program

• Ways to improve state outreach efforts re: developmental screenings
Scope of Discussions

• Ways to improve managed care plan (MCP) outreach efforts related to care coordination

• Ways to improve service linkages

• Ways to utilize varying levels of care coordination to maximize screenings & optimize health outcomes for children.
Emerging Themes

Data

- CMS 416 form & Developmental Screens
- Need to Drill down by screen type
- Marry with HMG & Head Start data
- Providers workflow & coding screens
- Periodicity & MCP HEDIS scores
Emerging Themes
Developmental Screening
Proposed Measurement

**Numerator:**
Number of children receiving 3 developmental screens and 2 autism screens by 36 months in CY 2014.

**Denominator:**
Number of eligible children ages 9 to 36 months in calendar year 2014.
Emerging Themes

Communication & Outreach

- State focus: compliance not active engagement
- Feedback loop – State to Provider
- Healthchek should be same as Kids Medicaid
Emerging Themes

Communication & Outreach

• Lots of entry points need to be covered

• County vs Plan responsibilities – best fit

• MCP’s can be more proactive re: screens, benefits & care coordination available
Emerging Themes

Definition of Medical Necessity

• New Ohio Administrative Rule has potential to improve EPSDT program

• Need for provider training

• Need for MCP Prior Auth Standards alignment w-new language re: “Correct or Ameliorate w/

• Definition should be in MCP contracts
Emerging Themes

Gaps in Coverage

• Referrals to programs (e.g. WIC, HMG, Head Start)
  • Must actually occur

• Families not aware of support services (clothing, heat, housing, transportation assistance)
Thank you for your continued engagement!