

LEGISLATIVE REPORT: PRENATAL CARE INCENTIVES
Enrolled House Bill 4392, Section 1665
Report Prepared By: Medical Services Administration
Michigan Department of Community Health
June 2004

Enrolled House Bill 4392, Section 1665: The department shall develop and implement a plan to improve access to health screening services under the EPSDT program for all Medicaid-eligible persons under the age of 21. The department shall provide documentation to the senate and house appropriations subcommittees on community health and the senate and house fiscal agencies on their progress in carrying out this section by June 1, 2004.

MDCH has initiated a comprehensive plan to improve EPSDT service delivery to Medicaid beneficiaries. Efforts to date have included beneficiary focus groups and beneficiary and provider surveys; testing and revision of written beneficiary materials; development of provider materials; development and implementation of web-based provider education; a demonstration project with three Medicaid health plans to implement and evaluate case management for well children who have not obtained well child services; Child and Adolescent Centers; and implementation of performance plan.

Focus Groups and Surveys

MDCH participates on a collaborative EPSDT workgroup with internal and external stakeholders, such as public health partners, Medicaid health plans and MSU Institute for Healthcare Studies (IHCS), with a goal of increasing rates of EPSDT service delivery to Michigan Medicaid beneficiaries. The workgroups' initial focus was to gather information from Medicaid beneficiaries and clinicians regarding EPSDT services. Focus groups and telephone surveys with the parents and/or guardians of Medicaid beneficiaries age 1-5, and clinician telephone surveys were conducted and completed. Findings indicated an overall lack of familiarity with the concept of "well child check-up" coupled with parental focus on episodic care. Key messages were identified that participants felt would promote well child care (e.g., early detection of life-threatening problems). Recommendations included using brief communications stressing key messages, promoting communication between primary care offices and beneficiaries regarding the importance of well child care, and tailoring interventions to meet the needs of beneficiaries.

Beneficiary Educational Materials

Based on the focus group and survey findings, the EPSDT Workgroup contracted with a graphics vendor to develop sample EPSDT educational materials with an emphasis on literacy level and cultural appropriateness. Three draft formats of material were developed, and six beneficiary focus groups were conducted to test the educational material formats and to obtain suggestions for dissemination of EPSDT/well child education. Using input from this second round of focus groups, MDCH is revising the existing EPSDT beneficiary pamphlet ("A Hug Shows You Care") and is also investigating the possibility of developing a culturally appropriate trilingual (English/Spanish/Arabic) pamphlet to address well child preventive services for Medicaid beneficiaries.

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Provider Materials

The EPSDT Workgroup developed an EPSDT Clinician Toolkit to provide clinicians with practical tools to assist in the identification, provision, and documentation of appropriate well child preventive services, such as immunizations, well child exams, and blood lead testing. The Toolkit includes clinician and parent information sheets (with Spanish and Arabic translations), the EPSDT periodicity table, immunization information and resources, a resource directory, and other information. The Toolkit has been widely disseminated by the EPSDT Workgroup participants and has been utilized by Medicaid health plans as a component of their provider education programs. The kit is reviewed and updated on an ongoing basis to ensure consistency with well child guidelines and CDC/ACIP immunization recommendations. An electronic version is available on the IHCS web site at www.ihcs.msu.edu.

Electronic Learning Module

Additionally, during 2004 MDCH developed a web-based EPSDT learning module in partnership with Michigan Virtual University (MVU). The module is available on the MVU web site, www.mivu.org, and is being promoted to providers, health plans, universities, and other stakeholders, and continuing education credits for nurses are available. In addition, the module was promoted through an educational session during the annual Michigan Medical Assistants Conference in May 2004.

Demonstration Project – Case Management for Well Children

MDCH has partnered with the Institute for Health Care Studies at Michigan State University and three Michigan Medicaid health plans in a collaborative project applying disease management strategies to a population of well children. The goals of this project are to increase EPSDT/well child exam and immunization rates for children enrolled in the plans. Components of this project include a data registry, beneficiary selection and stratification criteria, and case management for children without a record of well child exams or immunizations. In addition to measuring the impact of case management for the target population, the project is yielding significant information about barriers to well child care for Medicaid beneficiaries.

Child and Adolescent Centers

CMS has approved an amendment to Michigan's 1915(b) Comprehensive Health Care Program waiver that will allow the department to modify health plan rates health plans to provide more outreach to Medicaid children for key preventive services, such as EPSDT.

MDCH has proposed that MHPs and Child and Adolescent Health Centers enter into agreements and through the mutual effort, provide the needed outreach for EPSDT services. Child and Adolescent Health Centers deliver primary care services, including preventive services to Medicaid and at-risk children and teens throughout the state.

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These centers are designed specifically to attract youth who would otherwise not receive services. Through this waiver amendment and the agreements, funds will be available to enable outreach activities for key preventive services.

Managed Care Performance Plan

MDCH contracts with 17 Medicaid health plans throughout the state to provide comprehensive health care to beneficiaries, and approximately 80% of Michigan Medicaid children are covered by managed care. The health plan contract stipulates that plans are required to report performance for quality indicators, including the percent of health plan members who receive age specific well child visits and immunizations. Thresholds for each indicator are established, and plan performance is used as a basis for awarding performance bonus funds.

During each contract year, MDCH withholds .0025 (one quarter of 1%) of the approved capitation for each contracted Medicaid health plan in a performance bonus pool utilized for awarding health plan performance bonuses. The pool approximates over \$4 million and is distributed among the plans that reach the performance standards established by MDCH. During 2004-05, the performance bonus award is based on each plan's HEDIS[®]¹ and CAHPS[®]² scores and accreditation status. Bonus funds will be awarded based on cumulative points in each category of performance and proportion of Medicaid managed care population. Under this incentive system, all plans have the opportunity to receive award funds in direct proportion to their performance on each of the measures, including the provision of EPSDT services, well child visits and immunizations. Plan performance scores are summed within performance categories, including the legislative incentive standard regarding the provision of adolescent immunizations and well care. These legislative incentives comprise 25% of the total performance bonus award and represent a significant incentive to meet or exceed the established performance standards. The performance bonus award provides health plans with funds to initiate financial incentives targeting providers with a goal of achieving improved clinical care and beneficiary access.

¹HEDIS[®] – Health Plan Employer Data and Information Set, is a set of standardized performance measures designed to ensure that purchasers and consumers have the information they need to reliably compare the performance of managed health care plans. The performance measures in HEDIS[®] are related to many significant public health issues such as cancer, heart disease, smoking, asthma and diabetes. HEDIS[®] is sponsored, supported and maintained by the National Committee for Quality Assurance (NCQA).

²CAHPS[®], the Consumer Assessment of Health Plans Survey, is a standardized survey of consumers' experiences that evaluates plan performance in areas such as customer service, access to care, and claims processing. CAHPS[®] is sponsored, supported, and maintained by NCQA.