



Georgetown University
Health Policy Institute
CENTER FOR CHILDREN
AND FAMILIES

How Do We Approach and Talk About this Work?

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From 2016 Proposal Guidelines

“...support for children’s healthy development through expanding developmental screening and early intervention services at the state and community levels.” Related goal:

- *Improve the state screening rate according to AAP Bright Futures recommendation, referrals, systems linkages, and access to appropriate services for the state’s children towards supporting their healthy development and readiness to learn.*

What is our scope?

- EPSDT screenings/services/requirements
 - Vision, hearing, oral health
 - *Developmental screening as defined by AAP Bright Futures*
 - + social-emotional
 - + autism
- Early intervention
- Caregiver mental health
- Social determinants of health

Screening: What are we talking about?

- Surveillance or monitoring
- Screening – use of standardized, validated tool
- Evaluation



Screenings (AAP Bright Futures)

Screenings	Bright Futures Recommendations (1/2016 periodicity schedule)
<i>Developmental (e.g. ASQ)</i>	<i>9-, 18-, 30-month well-child visits</i>
Autism	18- and 24- month well-child visits
Behavioral (social emotional, e.g. ASQ:SE)	N/A
Vision	3, 4, 5, 6, 8 and 10 year old well-child visits
Hearing	Newborn, 4, 5, 6, 8, and 10 year old well-child visits
Oral Health	12-, 18-, 24-, 30-month, 3 and 6 year well-child visits

Developmental Screenings - Medicaid/CHIP

	Reimburse separately from EPSDT screen, require as part of EPSDT, and recommend or require specific tool(s) (15 states)	Reimburse separately, require as part of EPSDT, but NO recommended/required tools (10 states total)
CA	9- 18- 30-months, list of <i>recommended</i> tools provided. Providers required to refer families to the EI program if problem discovered.	
CO	<i>Requires</i> AAP-recommended tools	
IL	<i>Recommends</i> screening tools, including AAP-approved. The state provides a form for referral to EI based on a positive screen.	
OH		9- 18- 30-months
PA		9- 18- 30-months, provider EI referral requirement if problem detected.
TX	9 months – age 4, using the <i>ASQ or PEDS</i> , provider EI referral requirement based on a positive screen.	

Challenges to Common Ground



- Available Data – reporting developmental screening measure? Medicaid/CHIP, other plans?
- Policy definitions/scope/specificity
- Inconsistent application/lack of uniformity – within health, also between health and early learning
- Locus of change – state agency? Plans?
- Lack of shared understanding

Moving Forward

- Are shared understanding or definitions necessary?
- What does the variation mean for our collective work together?
- What are the most critical common threads to ensure the most productive learning community?
- How can we most effectively communicate our agenda to key audiences?