CONTEMPORARY OPPORTUNITIES TO SUSTAIN A SPECTRUM OF INTEGRATED SERVICES FOR YOUNG CHILDREN AND THEIR FAMILIES

Early Childhood Community of Practice
2012 Training Institutes – Orlando FL
Frank Rider, TA Partnership
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July 25, 2012
Affordable Care Act
U.S. Supreme Court (June 28, 2012)

“The Supreme Court upheld a law that invests in children’s health from the ground up, providing all children in this country with Access to health care services, age-appropriate Benefits to meet their unique needs, and high-quality, affordable health care Coverage.”

Robert W. Block, MD, American Academy of Pediatrics

“…can continue making progress covering uninsured kids, protecting millions of kids and parents from abusive insurance practices, and delivering quality care for kids from head to toe.”

Bruce Lesley, First Focus

“I am delighted the Court has upheld the Affordable Care Act, but I am deeply concerned by the limitation of the expansion that could exclude millions of poor parents.”

Marian Wright Edelman, Children’s Defense Fund

“Now the responsibility for ensuring this is indeed a victory for all rests squarely on the shoulders of the states.”

Joan Alker/Jocelyn Guyer, Georgetown Health Policy Institute
Affordable Care Act

Expand Access to Health Care

- Private insurance
- Medicaid, CHIP Expansion
  (state-level advocacy)

Children with “pre-existing conditions”

- no exclusions
- no lifetime caps
Affordable Care Act

Preventive Health Services

- No co-pay, co-insurance or deductibles
- Evidence-based preventive services
- Routine immunizations
- Preventive care, screenings for infants and children
- Preventive care, screenings for women
Affordable Care Act

Maternal, Infant and Early Childhood Home Visiting Program

- Prioritize High-Risk Populations
- Evidence-Based Home Visiting Programs
- Grants to All 50 States and Territories
- Needs Assessment Required
- Cross-System Collaboration Required
- Outcomes Orientation
Medicaid’s EPSDT Benefit

- Entitlement Benefit for Medicaid-Eligible Children
- Designed to cover all “medically necessary” care:
  - Preventive (periodic screenings -> assessment)
  - Primary care
  - Dental, hearing, vision
  - MH/BH services are covered “acute care” services
  - Long term care for children with special healthcare needs (therapies, equipment, support services)

*EPSDT benefit is extremely broad!*
Five Medicaid Dimensions to Help Sustain Integrated Early Childhood Services

1. Maximize enrollment of eligible children.
2. Expand services and supports.
3. Expand provider types.
4. Cross-system strategies to optimize funding.
5. Improve reimbursement methods.
IDEA, Part C
(enacted in 1986, rules amended in 2011)

- Early intervention services for infants and toddlers with disabilities
- November 2011 rules changes impact:
  - family engagement
  - child find/evaluations/assessments/eligibility
  - IFSP development, implementation, and review
  - transition from Part C to other programs
  - coordination with Head Start/Early Head Start, early education, and child care programs.
Child Abuse Prevention and Treatment Act
(enacted in 2003, amended in 2010)

- States must refer certain children under age 3 to early intervention services under Part C of IDEA.
- The CAPTA Reauthorization (2010):
  - Encourages family participation in case planning and placement
  - Requires that newborns diagnosed with fetal alcohol spectrum syndrome receive appropriate referrals to CPS by health-care providers
  - New sexual abuse-related provisions
  - Mandates criminal record checks for other adults living in adoptive and foster homes.
Race to the Top
Early Learning Challenge [RTT-ELC] Grants

- What is RTT-ELC?

- Phase I: CA, DE, MD, MA, MN, NC, OH, RI, WA

- Phase II (Rx): CO, IL, NM, OR, WS can apply for 1/2 their initial funding requests

- 4-year grants of $50-100 million (or 1/2 Phase II)

- Family involvement is encouraged
SOC Expansion Grants (SAMHSA)

- 24 SOC “XP” grantees
  (1 year grants, 2011-12)

- 15* SOC Expansion Implementation
  (4 year cooperative agreements, 2012-16)

*estimated # of awards
Workforce Development Opportunities

Examples:

- HRSA Mental and Behavioral Health Education and Training Grants (June, 2012)
- Health Profession Opportunity Grants (Affordable Care Act, 2010)
- Veterans Retraining Assistance Program (July, 2012)
- Trade Adjustment Assistance Community College and Career Training Grant Program (2011)
Community Philanthropy Trends

United Way: From Program Outcomes to Community Impact

- 2008 United Way Goals for the Common Good.

- These 10-year goals, to be reached by 2018, are:
  - **Education**: Cutting the nation's high school drop-out rate in half.
  - **Income**: Getting half the lower-income families who are financially unstable on the road to economic independence.
  - **Health**: Increasing by one-third the number of youth and adults who are healthy and avoid risky behaviors.

Community Philanthropy Trends

From Community Impact to Collective Impact

Example - Collaborative neighborhood revitalization initiatives:

- Annie E. Casey Making Connections
- Local Initiatives Support Corporation (LISC)
- Harlem Children's Zone

Quality Rating and Improvement Systems (QRIS)

- What is QRIS?
- Establishes quality standards continuum
- Empowers parents to be “savvy consumers”
- Can create pathway for aligning funding
- Potentially powerful system reform tool
- Spreading rapidly across the U.S.
Information Resources

Workforce Development:
- http://bhpr.hrsa.gov/grants
- http://www.doleta.gov/taaccct

Philanthropic Trends:
- http://www.hcz.org
- http://www.rwjf.org/vulnerablepopulations

QRIS National Learning Network: http://qrisnetwork.org