

**IOWA'S INITIATIVE FOR CHILDREN'S MENTAL HEALTH SYSTEMS INTEGRATION**

**IMPLEMENTING SECTION 2703 HEALTH HOME STATE OPTION**

Association of Maternal Child Health Programs Annual Meeting 2013  
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**OVERVIEW**

- Key Issues
- Systems Design
- Integrated Health Homes

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**KEY ISSUES**



*Child Centered and Family Driven • Community Based • Culturally Competent*

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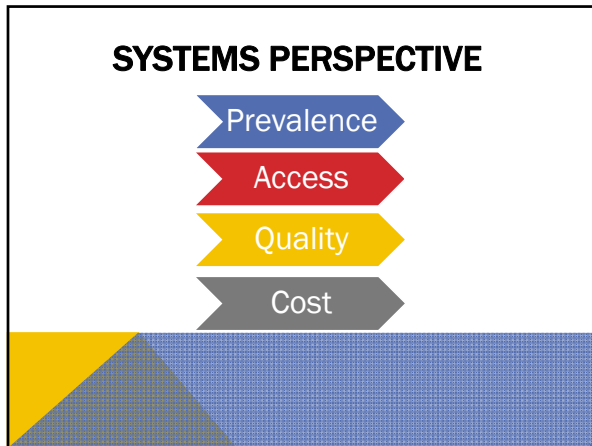
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### QUICK FACTS

#### Prevalence – National Data

- 1 in 5 children birth to 18y has a diagnosable mental health disorder.
- 1 in 10 youth has serious mental health problems that are severe enough to impair how they function at home, in school, or in the community.
- Onset of major mental illness may occur as early as age 7-11 years .

National Center for Children in Poverty, 4/2011

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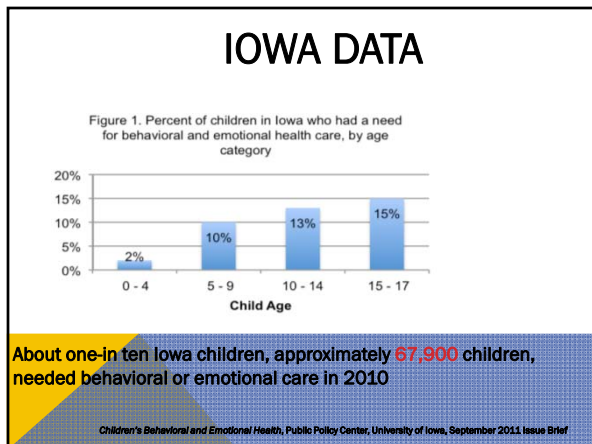
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## QUALITY

- Shortage of Qualified Providers
- Disparate distribution
- Evidenced based guidelines and practices
- Standardized Outcomes
- Patient and family engagement

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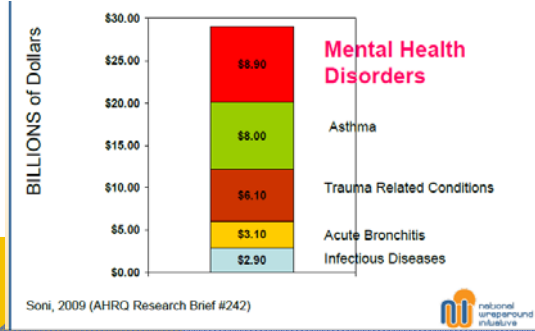
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## MENTAL HEALTH IS THE COSTLIEST CONDITION OF CHILDHOOD



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## WHY ARE OUTCOMES SO POOR AND COSTS SO HIGH?

### Child and family needs are complex

- Youth with serious emotional disorders have multiple overlapping problem areas that need attention
- Families often have unmet basic needs
- Traditional services don't attend to health, mental health, substance abuse, and basic needs in a holistic manner
- Systems are in silos

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**Iowa Children's Disability Services Redesign 2011-2012**

- Identify mechanisms to integrate service delivery across multiple systems
- Institute a System of Care framework for Children's services in Iowa
- Implement Health Home Model of Service Delivery

A cartoon illustration of a young boy with a blue cap, a yellow shirt, and red pants, running happily to the right. He has a wide smile and is looking forward.

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**IOWA'S INITIATIVE FOR CHILDREN'S MENTAL HEALTH SYSTEMS INTEGRATION**

**GOAL 1:** Create the infrastructure for a pediatric managed behavioral health organization

**GOAL 2:** Develop, implement, and support the model for the community based pediatric integrated health homes

**GOAL 3:** Advocate for continuous pediatric mental health improvement and innovation at the state and community levels

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## INTEGRATED HEALTH HOMES

State Plan Amendment (Section 2703)

- **Children with Serious Emotional Disorder**
- **Community Health Home Services**
  - Care coordination and health/mental health promotion
  - Family support services
  - Comprehensive case management
  - Transitional care across settings
  - Linkage to social supports and community resources
  - Use of Health IT
- **Triple Aim**

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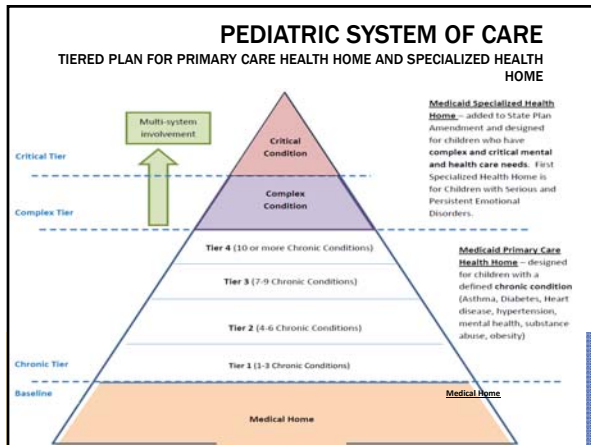
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### TITLE V CSHCN PROGRAM INTEGRATION

- Needs Assessments- identify and address state and local mental health priorities.
- Workforce Development-focus on systems building (training, technical assistance and coaching to families, providers, agencies, community stakeholders.)
- Population health practices supported through quality improvement methodology.
- Children's tele-health behavioral and mental services.
- Comprehensive, integrated model of care-blends medical model with a social support model.
- System changes-broad array of home and community based services and supports.
- Evidence-informed, practice guidelines and treatment strategies.
- Role of ecological, biological, social, and developmental factors on health outcomes.
- Awareness of federal and state policies effecting pediatric health outcomes.
- Focus on children's "positive" mental health and develop measures
- Data collection and analysis methodology to measure and report on health and system outcomes.

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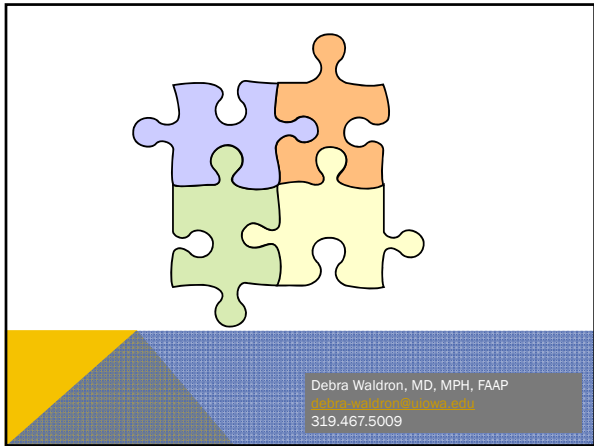
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