



Developmental screening, referral and linkage to services: Lessons from ABCD



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DEVELOPMENT FOR CHILDREN WITH ASD/DD

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1:00PM-2:00PM EASTERN TIME

NASHP



- National Academy for State Health Policy
 - Working across states, agencies, and branches of government
 - Helping states to advance and implement workable solutions for major health policy challenges
- NASHP administered the **Assuring Better Child Health and Development (ABCD)** initiative from 2000-2014
- Supported by The Commonwealth Fund

ABCD common state goals



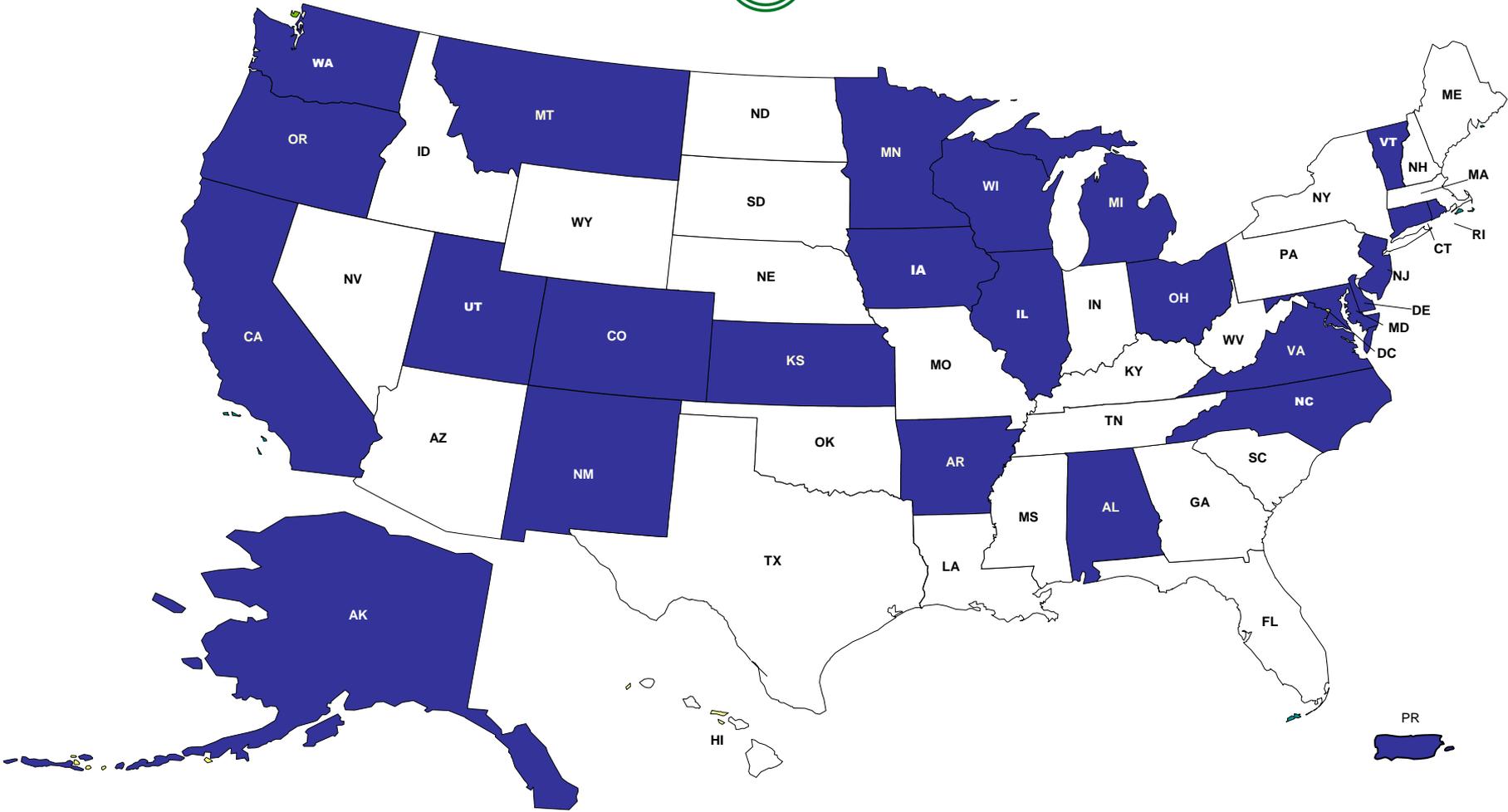
- Increase appropriate, effective screening by pediatric primary care providers
- Ensure providers and families have information they need to identify, refer, and provide treatment
- Ensure effective care coordination and linkages between primary care providers and other providers who support children's healthy development

Who are ABCD states?



- **ABCD I: General development**
 - NC, UT, VT, WA: 2000-2003
- **ABCD II: Social/emotional development**
 - CA, IA, IL, MN, UT 2004-2007
- **ABCD Screening Academy: Wide-spread adoption of effective developmental surveillance and screening**
 - 21 states 2007-2008
- **ABCD III: Care coordination and linkages**
 - AR, IL, MN, OK, OR 2009-2012

ABCD states



Policy improvements: identification and screening



- Creating and publicizing new expectations
- Incenting change through payment policies
- Creating consistent expectations among state programs
- Partnering with providers and plans to provide resources and promote improvement

Developmental screening: examples



- Work with PCPs to identify and promote tools
- Help PCPs integrate tools into their practices
 - Learning collaboratives (UT), on-site training (DC), physician-mentors, workshops (DE)
- Change payment policies
 - Allow reimbursement of CPT code 96110 -- reimbursement for structured screening, including autism screeners (OR)
 - Pay for up to two ‘units’ of CPT 96110 on the same date of service (general developmental/autism/social-emotional screening) (MD)
 - Pay MCOs an incentive payment for increasing screening rates (MN)
 - Stop payments for EPSDT visits unless bill indicates that PCP conducted a developmental screen (NC)

Identification and screening: results



- Colorado: “Since the inception of ABCD, we have increased the number of pediatric practices that use a standardized developmental screening tool as a routine component of well child visits from less than 5% to 70%.”
- All five states that participated in ABCD II saw primary care practices in their pilot initiatives increase their use of standardized screening tools during well-child visits and in four of these states, screening rates in the pilots exceeded 75 percent.

Policy improvements: care coordination/linkage to services



- Developing consistent instruments, tools and processes
- Using provider incentives
- Implementing continuous improvement strategies
- Linking existing or building new data systems
- Building consensus and/or shared visions to promote spread and ensure sustainability

Linkages: examples



- Standard, universal referral, consent and feedback forms for primary care and Part C providers to use statewide (AR, IL, MN, OK, OR)
- Managed care performance improvement projects (OR)
- Medical homes models and incentive payments (MN, OK, OR)
- New billing codes (OR)
- Maintenance of certification credit (IL, MN, OR)
- Web portals and state data sharing systems (IL, OK)
- Community/parent engagement (AR, OK, OR)

Care coordination and linkages to services: results



- North Carolina: “As a result of ABCD, children with developmental needs are identified earlier. Referrals to the Early Intervention program are on average made at an earlier age, and have more than quintupled since 2004.”
- Oklahoma: In the portal’s first 16 months, we’ve seen on average over a month’s time shaved off closing the communication loop. The portal also showed us that the right children are being referred (~75% were found eligible for EI).”

Public/private partnerships



- Arkansas Early Childhood Systems Working Group
- Maryland Developmental Screening Advisory Group through the Parents Place of Maryland
- Minnesota Mental Health Action Group (MMHAG)
- The Oregon Pediatric Improvement Partnership (OPIP)

Partnership recommendations



- Identify critical stakeholders and partnerships
 - Medicaid, early childhood initiatives, PCP champions, MCH, mental health, Part C
- Identify complementary efforts and momentum
 - Varied- screening in child care, medical homes
- Identify key champions
 - Physician champions, parents/caregivers
- Know your audience and define terms

Program recommendations



- Use practice to inform policy and vice-versa
- Consider referral and follow up needs
- Learn from others (borrow/steal from states)
- Planning for sustainability at the outset
- Measure results
- Keep at it

For more information



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- ABCD Publications Library:
<http://www.nashp.org/sites/default/files/abcd/ABCDresources.org/ABCD%20Pubs%20Library.pdf>
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