2015 Profile

North Carolina CHIPRA Quality Demonstration Grant Program

N.C. Department of Health and Human Services
Office of Rural Health
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http://www.ncdhhs.gov/divisions/orh

Overview

- The Children's Health Insurance Program Reauthorization Act (CHIPRA) is a federal program that provides health insurance to children enrolled in Medicaid and the Children's Health Insurance Program (CHIP otherwise known as Health Choice).
- The CHIPRA Quality Demonstration Grant, an enhancement to CHIPRA, identifies strategies for improving the quality of healthcare for children enrolled in the CHIPRA program, with the ultimate goal of reducing costs.
- North Carolina was one of 18 states awarded this federal grant.
- The 5-year, \$9.2 million grant is for innovation in three areas:
 - ✓ Improving pediatric quality by improving the measures by which CHIPRA is monitored (Category A).
 - ✓ Evaluating medical home models to reduce costs and improve the delivery of children's healthcare (Category C). A child's medical home includes behavioral and oral health.
 - ✓ Testing and evaluating the Model Children's Electronic Health Record Format (Category D).
- ORH secured a one year grant extension from CMS and DHHS to finish grant activities.

Importance

- Nearly half of all children in North Carolina are on Medicaid and CHIP. Given the large numbers enrolled in these programs, finding efficiencies in these systems can dramatically increase quality and reduce costs.
- Children do not consistently receive recommended preventative services.
- Poor health of our state's children translates to poor health in adults, which increases the burden on North Carolina's health system.
- Inadequate electronic health record systems create costly inefficiencies.

Cost, Savings and Program Monitoring*

The CHIPRA Quality Demonstration Project impacts the health of nearly 1.3 million children in North Carolina enrolled in Health Choice and Medicaid. Cost savings are achieved through case management, reductions in emergency utilization department, mental health integration among others.

Category A: Since the beginning of the program in 2010, eligible children have shown increases in:

- Having had four or more dental varnishings, from 37% to 43%.
- BMI percentile monitoring in children, from 2% to 17.6%.
- Adolescent Well Child Visits (WCVs) in the past year, from 39% to 44%.
- Autism screening of toddlers (using the M-CHAT tool), from 42% to 55%.

Category C: 23 practices participated in quality improvement projects that are replicable state-wide. This learning collaborative concluded in 2014 but networks continue to disseminate training and content:

- Maternal Depression: 16 practices completed screening in 98% of well visits.
- <u>Developmental Screening</u>: 100% of practices screening at 98%.
- Weight for Length: 20 practices at 100%.
- BMI Percentile Coding: 100% of practices at all ages documenting at 100%.
- Autism Screening: 100% of practices completed screening at 100% of recommended visit schedule.

Category D: Improvements to children's EHR operating in 26 practices in 15 counties with five EHR vendors actively evaluating the model format for improvements in quality and cost savings.

*2013 data

<u>Technical Assistance: Supporting safety net infrastructure in vulnerable communities:</u>

100 Technical Assistance activities for program development and grant support.

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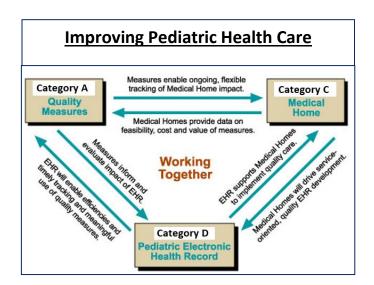
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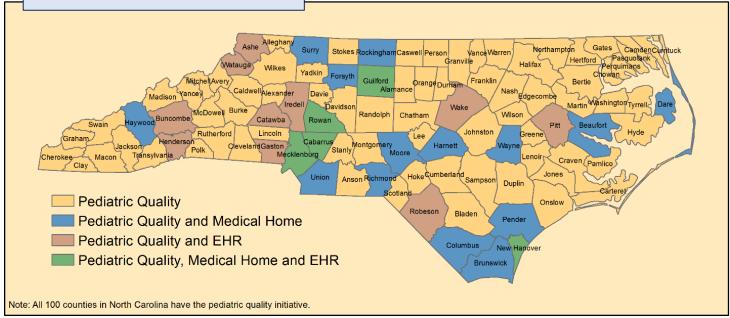
CHIPRA Funding Sources for SFY 2014-2015:

• Federal - \$3,561,787

Program Coverage

- Works with medical practices and health departments across North Carolina within the Community Care of North Carolina (CCNC) network.
- Category A is in all counties of North Carolina.
- Categories C and D are in 19 and 15 counties, respectively.





If you have further questions, please contact:

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