

Opportunities and Challenges for Promoting Children's Health in Managed Care Organizations

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Objectives

- Construct conceptual foundations for health plan performance accountabilities in meeting children's health needs
- Review exemplary practices from plans that are meeting some of these challenges

Methods

- Literature Review
 - Descriptive
 - Analytic
- Interviews / Perspective
 - Child health and policy experts
 - Health plan managers
- Synthesis
 - Describe children's health needs
 - Evaluate current & potential “system” states
 - Identify exemplary practices

Assumptions

- Children have unique/interwoven physical, emotional, cognitive needs that are best met through a broad range of interventions encompassing/transcending medical care
- Americans tend to prefer a market-oriented allocation of resources with a safety net to ensure everyone has equal opportunity
- Need for integration among medical, public health, social service, coverage programs

Assumptions, continued

- Potential strengths of managed care
 - Broad benefits with emphasis on prevention
 - Coordination of care
 - Cost-savings will help preserve/expand access
- Potential weaknesses of managed care
 - Inflexible benefit limits / referral mechanisms
 - Performance measurement still nascent
 - Market competition at odds with integration?

Responsibilities to Enrolled Children

Promote the integrity of relationships between patients and health professionals...

- Why
 - Trust/open communication are key to patient compliance, satisfaction and health improvement
- How
 - Guidelines should augment, not replace, professional judgment and experience
 - Administrative systems should support practice improvements while avoiding unwarranted intrusion in relationships

Recognize unique developmental needs of children in covering/coordinating care...

- Covered Benefits
 - Educate purchasers on appropriate and cost-effective coverage choices
 - Set copayments to encourage responsible use of services without discouraging needed care
 - Offer incentives to encourage preventive care

Recognize unique developmental needs of children in covering/coordinating care...

- **Provider Networks**
 - Contract with appropriate number and mix of geographically accessible physicians/providers
 - Evaluate partnerships with inner-city hospitals and community health centers that are skilled in meeting children's needs
 - Consider pros/cons of specialized provider networks (e.g. mental illness, disabilities)

Recognize unique developmental needs of children in covering/coordinating care...

- Coordination of Care
 - Offer a flexible assortment of benefits to enable intelligent substitutes for more costly care
 - Evaluate conditions for process/outcome achievement for primary vs. specialty care
 - Help primary care physicians to appropriately detect, treat and refer to specialty care
 - Simplify referral mechanisms as appropriate

Recognize unique developmental needs of children in covering/coordinating care...

- Payment Mechanisms
 - Structure fee enhancements to encourage preventive care and appropriate ambulatory care substitution for inpatient/ER care
 - Support research and demonstration on risk adjustment mechanisms

Recognize unique developmental needs of children in covering/coordinating care...

- Member Education
 - 24-hour Nurselines
 - High-risk condition education programs (prenatal care, asthma self-management, etc.)
 - Parent support groups/advisory committees
 - Specially educated member services staff

Help lower nonfinancial barriers to care...

- Why
 - Enhanced financial access often not enough to induce improvements in care-seeking
- How
 - Coordinating/providing transportation and interpretation services; appointment reminders
 - Multilingual and geographically accessible member services staff
 - Specialized programs, e.g., teen clinics

Work with health professionals to improve effectiveness of health care delivery...

- Why
 - Idiosyncratic variations in care indicate need for evidence-based, systematic improvement
- How
 - Performance feedback
 - Guideline development
 - Cooperative improvement programs, e.g.,
 - Immunization reminders
 - Follow-up care of low-birthweight infants

Establish linkages with community agencies to prevent child health problems

- Why
 - Continuum of health determinants transcends traditional medical care system
- How
 - Support professionals in screening for deficits and referring to community programs
 - Contracts with school-based clinics, public health agencies, VNAs

Responsibilities to the Community at Large

Collaborate in community-based interventions to improve long-term health outcomes...

- Why
 - Multilevel efforts needed to address “social morbidities” impacting health
- How
 - Community and school-based partnerships for education and outreach
 - Disease prevention: immunizations/asthma
 - Safety: bicycle helmets
 - Violence prevention: tattoo removal

Accountability for performance in meeting child health needs...

- Why
 - Ensure that market incentives benefit children and society at large
- How
 - Support continued development of performance evaluation measures and standards
 - Participate in purchaser/consumer education
 - Establish reasonable appeals procedures

Recognize/respect special ethical duty toward children and families...

- Why
 - Health care meets a fundamental human need (not a business like any other); children lack economic clout in the marketplace
- How
 - Honest marketing / responsible advertising
 - zero tolerance for breaches of standards
 - rewards for retention of members
 - health-related messages

Support community health monitoring and research to benefit children...

- Why
 - Private data repositories have potential benefit for population health surveillance and research
- How
 - Collaborate in community-wide registries
 - Participate in health services research studies to improve clinical practice and delivery system

Support reasonable public policy initiatives to advance children's health

- Why
 - Enlightened regulation may be needed to establish market rules that benefit children
- How
 - Share objective evidence to help identify needs and avoid unintended consequences, e.g., preserve opportunity for constructive delivery system innovation

Implementation Issues

- Who pays?
 - Constraints of global economic realities
 - Competing social spending priorities
- Should we threaten, cajole or plead?
 - Plan self-governance: fiduciary/ethical duties
 - Purchasers: contractual obligations
 - Public/policymakers: informed regulation

Conclusions

- Society must establish incentives leading to a community-oriented market that balances need for quality and affordable coverage
- Market-oriented health policy places health plans in quasi-governmental role suggesting responsibility to help promote integration
- There are no easy answers, only difficult choices