

# Kids First Alaska



*Insuring Alaska's Children  
and Our Future*

October 19, 2010 - Anchorage

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# ACCOMPLISHMENTS

- **2009 CHIPRA Performance Bonus Payment (PBP) - \$700,000**
- **Applied 2010 CHIPRA PBP - estimated \$4,000,000 - \$6,000,000**
- **CHIPRA Quality of Care Grant – AK, OR and WV - \$11,277,361 – February 2010**
  - **Testing the children’s quality metrics**
  - **Utilizing HIT/HIE**
  - **Evaluating provider models of care**
    - **Patient Centered Medical Home**
    - **Care Coordination**

## **T-CHIC Description**

The Tri-State Children’s Health Improvement Collaborative (T-CHIC) will demonstrate the combined impact of patient-centered care delivery models and HIT on the quality of children’s healthcare. What set the application apart was the use of measures across three states with wide variation in their delivery systems and information technology implementation. The three states share a very rural and low-income geographic makeup. The goal of the grant is to demonstrate that the quality of children’s health care can be improved across states with various levels of HIT implementation and delivery system reform.

The Collaborative states will identify modifications or alternate approaches/indicators to be tested in conjunction with the core measures.



# Accomplishments (continued)

## FFY09 (October 1, 2008 - September 30, 2009)

HEDIS Methodology? Yes, 2010 specs (measures 1,2 and 4), except calendar year is not used so it is not true HEDIS.

### Core Measure #1: Well Child Visits in the first 15 months of life

no visits	1 visit	2 visits	3 visits	4 visits	5 visits	6+visits	total (denom for all)
145	204	212	244	264	349	2063	3481
% no visit	% 1 visit	% 2 visits	% 3 visit	% 4 visits	% 5 visit	% 6+ visit	
4.17%	5.86%	6.09%	7.01%	7.58%	10.03%	59.26%	

### Core Measure #2: Well-Child Visits in Children the 3rd, 4th, 5th, and 6th Years of Life

no visits	1+visits(num)	total(denom)	% 1+ visits (rate)
4612	6239	10851	57.50%

### Core Measure #3: Use of Appropriate Medications for Children with Asthma - HEDIS like methodology

Age Group	Total Denominator	Rec'd Med- (numerator)	Rate
5 - 9 years	723	433	59.89%
10 - 17 years	882	451	51.13%
5 to 17 years	1605	884	55.08%

### Core Measure #4: Children's Access to Primary Care Practitioners

Age Group	no visits	1+ visits (num)	total (denom)	%1+ visits (rate)
12 - 24 mo	185	3485	3670	94.96%
25 mo - 6 yr	1481	9401	10882	86.39%
7 - 11 yr	600	3563	4163	85.59%
12 - 19 yr	1232	6402	7634	83.86%

- First year reporting four children's quality of care measures
- Will report on 14 -16 measures in FFY 2010

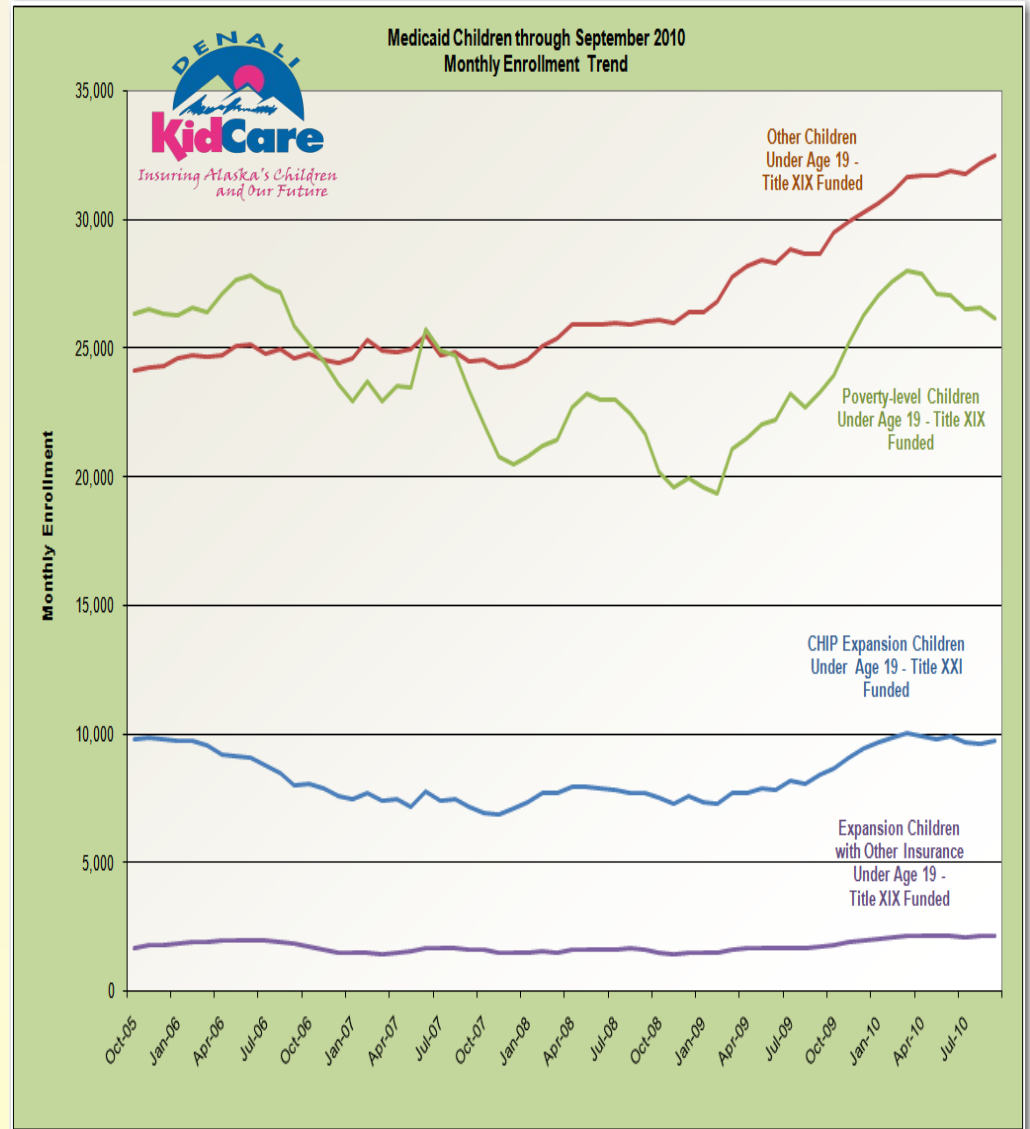
# CHALLENGES

## ➤ Covering low-income children to 200% -

- Veto of Denali KidCare expansion – abortion
- Medicaid Cost Containment Task Force

## ➤ Medicaid Eligibility Culture

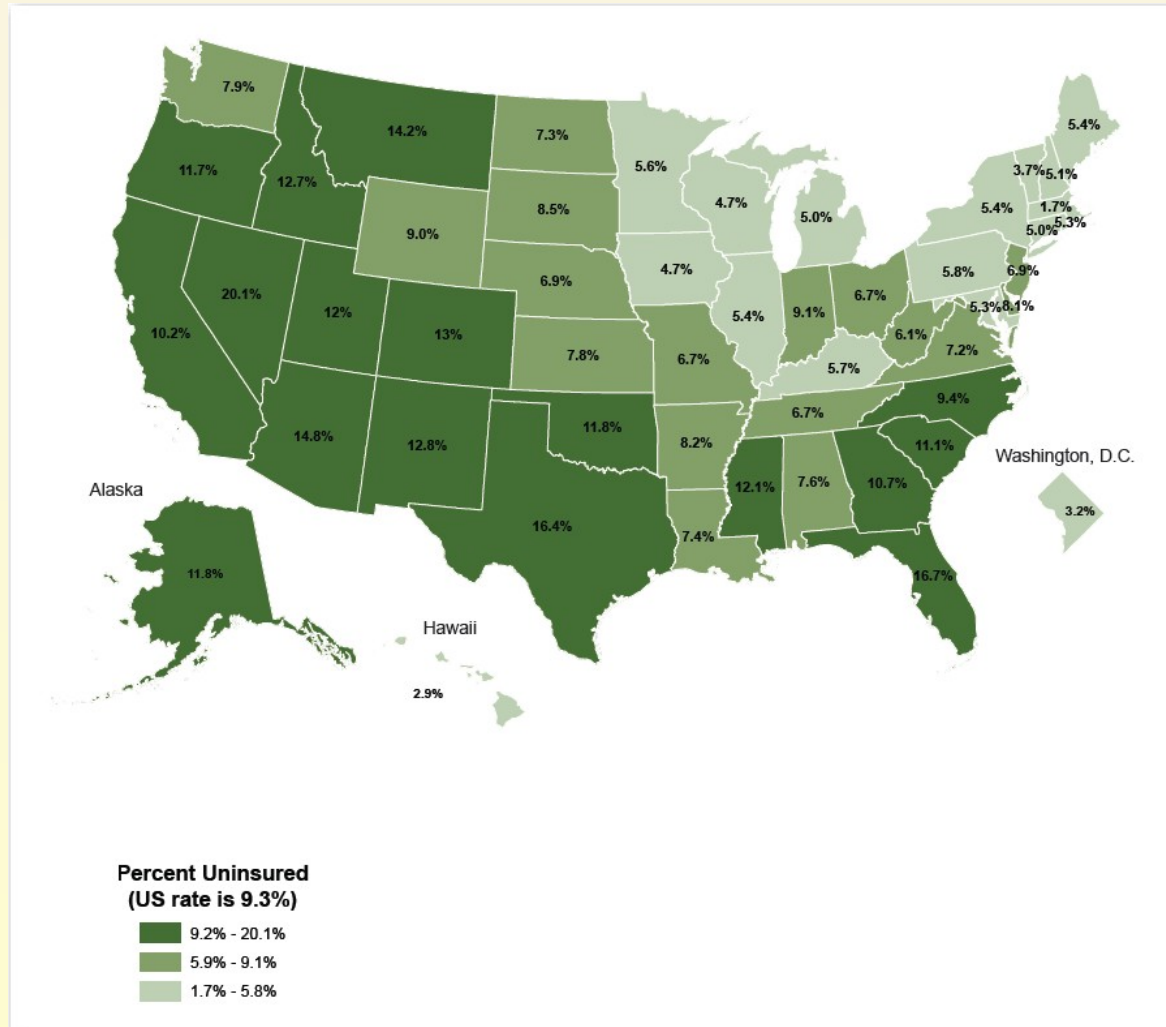
- Outreach and enrollment
  - No signature on renewal
  - Telephone renewal
  - ELE
  - Presumptive eligibility
  - Electronic application



# **OPPORTUNITIES**

- **Enhance process simplifications to maintain enrollment gains/coverage stability achieved with 12-months continuous eligibility**
  
- **Implement ELE (express lane eligibility) with SNAP (food stamps) and WIC (women's infants and children) in FFY 2011**
  
- **CHIP State Plan Amendments**
  - **Covering pregnant women with enhanced funding under CHIP from 185% FPGs**
    - **Would likely require state legislation to create a separate CHIP**
    - **Would have to expand existing Medicaid pregnant women eligibility – 175% - 185%**
  
  - **Covering the unborn child – 175% FPG and higher with enhanced funding under CHIP**
    - **Would likely require state legislation to create a separate CHIP**
    - **Option to cover the unborn rather than the pregnant woman**
  
  - **Covering Documented Legal Immigrant Children**
    - **Removal of the 5-year bar**
  
- **CHIP Rebasing of Annual Allotment 2011**
  - **2009 CHIP Allotment - ~\$22,000,000**
  - **2010 CHIP Allotment - same**

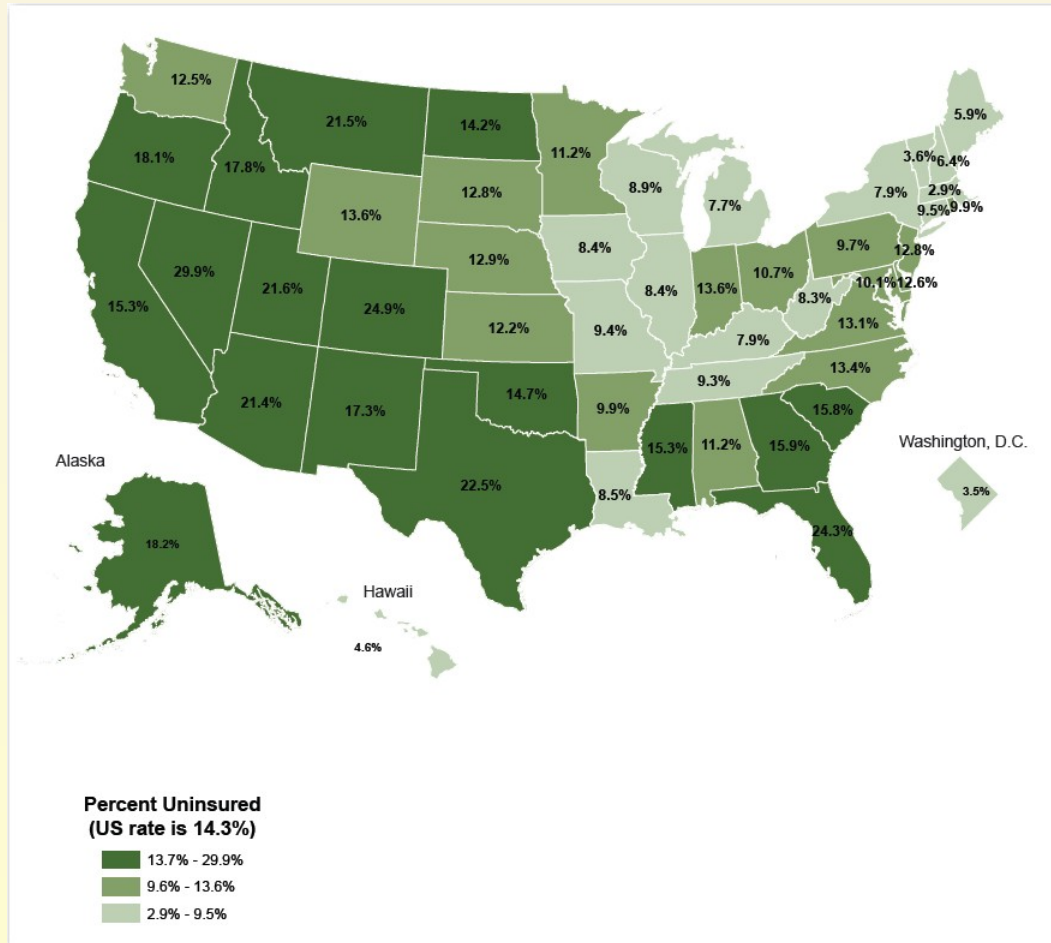
**Q -What percentage and number of Alaskan children are uninsured?  
 A – 11.8% or 22,000 of Alaskan children are uninsured.**



Source: Urban Institute analysis of American Community Survey (ACS) 2008 data from the Integrated Public Use Micro data Series (IPUMS) of the Minnesota Population Center. Note: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP on the ACS. \* Indicates that the state percentage is statistically different from the national percentage at the .10 level. Number of

## Q – What % and # of Alaskan children are low-income (<200% FPL) and uninsured?

**A – 18.2% or ~12,000 of Alaskan children live in households earning less than 200% FPL and are uninsured. About 55% of all uninsured children in Alaska are low-income.**



Source: Urban Institute analysis of American Community Survey (ACS) 2008 data from the Integrated Public Use Micro data Series (IPUMS) of the Minnesota Population Center. Note: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP on the ACS.



# Share of Uninsured Children by Age AK compared to U.S.

\*ACS 2008 Data

## ➤ Ages 0 - 5

- AK - 27.3%
- U.S. - 25.5%

## ➤ Ages 6 -12 – **second highest in nation**

- **AK - 40.1%**
- U.S. - 34.2%

## ➤ Ages 13 - 18

- AK - 32.6%\*
- U.S. - 40.3%

\* Indicates that the state percentage is statistically different from the national percentage at the .10 level.

# The Affordable Care Act

## Early Gains for Children and Young Adults

1. States must maintain Medicaid and CHIP eligibility and enrollment procedures for children until October 1, 2019.
2. States have flexibility to expand Medicaid and CHIP eligibility further or to simplify enrollment.
3. Certain small employers can receive tax credits covering 35% (50% by 2014) of health care premiums.
4. Uninsured children and families with pre-existing conditions can seek coverage through newly established high-risk pools – PCIP.  
<http://www.healthcare.gov/law/provisions/preexisting/states/ak.html#>
5. Everyone signing up for a new health plan will receive preventive services.
6. Children were not supposed to be denied coverage for a pre-existing condition under ACA – many health insurance companies have decided not to offer this coverage in individual state insurance markets:
  - a. Aetna has stopped selling child-only health plans in Alaska.
  - b. Appears as though Premera and ODS may still be offering child-only health plans in AK.
7. Young adults up to age 26 can obtain coverage through a parent's plan.