

Assuring Better Child Health and Development (ABCD) Program Improves Screening Rates



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KEY POINTS FROM THIS BRIEF:

- The ABCD Program was designed to identify and develop a set of best practices by which primary care physicians can promote healthy development and identify children five years of age or younger with developmental delays and arrange for early intervention.
- Nationally, 16% of children have disabilities, speech and language delays, mental retardation, learning disabilities, and emotional or behavioral problems, but less than 50 percent of these are detected before starting school.
- ABCD has been effective in improving rates of developmental screening among Medicaid-eligible children in the target group from 12% in 1999 to 91.4% in 2015.

Overview

This data brief analyzes the influence of the ABCD program rates of developmental screening in North Carolina. The ABCD program was initiated by Community Care of North Carolina (CCNC) in 2000 to address low national and statewide rates of developmental screening. In 1999 a Medicaid audit of child well visits showed that developmental screening rates were as low as 12%. This brief

details improvements this in rate over time. All figures were drawn from public documents and work completed by CCNC, state agencies and the Smart Start program. The results of our analysis showed a drastic improving in rates of developmental screening among Medicaid-eligible children since ABCD was implemented: from 12% in 1999 to 91.4% as of December 2015.

Background

The ABCD Program began in early 2000 with a grant from the Commonwealth Fund national ABCD Project. By 2004 the ABCD program expanded to all 14 of North Carolina’s Community Care regions. To improve the recognition of developmental delays in children CCNC worked with practices to integrate standardized, validated developmental screening tools at certain well-child visits. CCNC established the N.C. ABCD State Advisory and ABCD QI Groups that have met quarterly since 2001 to support primary care practices and parents in best practices, to identify barriers, and to promote policies for sustainability and spread. Since 2004, N.C. Medicaid requires a formal, standardized developmental and behavioral screening tool at the well-child Early, Periodic, Screening, Diagnosis and Treatment (EPSDT)

NC has had the highest rate of developmental screening based on the National Survey of Child Health (NSCH) for the 2007, 2009, and 2011-2012 surveys.

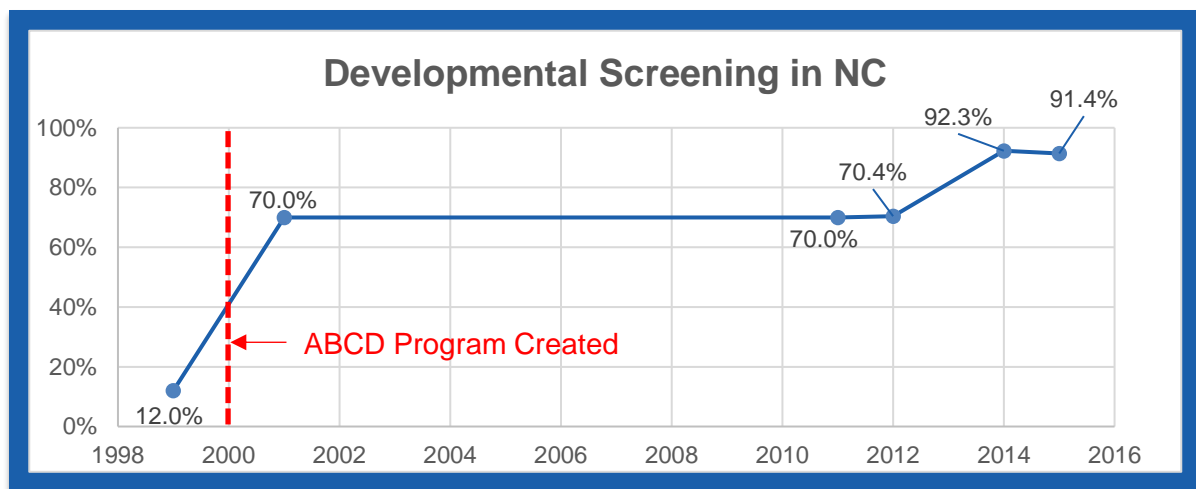
visits. These screenings occur at the 6-month, 12-month, 18- or 24-month, 36-month, 48-month and 60-month visits.

NC Smart Start began partnering with the ABCD Program in 2001 in several counties around the state. North Carolina received a four-year Children’s Health Insurance Program

Reauthorization Act (CHIPRA) grant in 2010, bringing new attention to Developmental and

Behavioral screening. In the last 3 years, using funding from the state’s Race to the Top Early Learning Grant, Smart Start partnered with CCNC to place an ABCD Quality Improvement Coordinator in each of CCNC’s 14 networks. The project has tracked claims on screening rates since 2001. Quality Improvement Coordinators look closely at referral and feedback rates, in addition

Figure 1. Developmental Screening Rates in NC



Screening rates for all CCNC-enrolled 0-5 year-old children. Source: NC Medicaid Claims

to reviewing screening rates through chart audits. The coordinators share data with the practices and help with referral processes. Another measure of NC’s success comes from the National Survey of Children’s Health, which

includes questions to parents regarding developmental screening at their young child’s primary care visits. On the NSCH, North Carolina had the highest rate of development screening for the 2007, 2009, and 2011-12 surveys. (Figure 2)

Figure 2. National Screening Rates

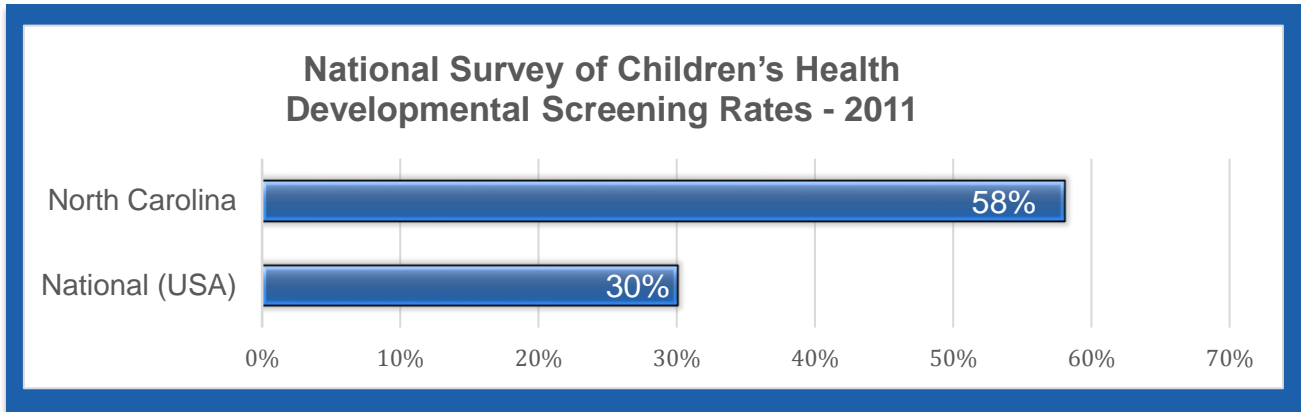


Figure 3. How Smart Start Support to the ABCD Project Has Changed Screening Practices

ABCD QI Project		
Outreach	Outcomes as of June 2015	
ABCD coordinators are working with 246 practices and 1,345 providers serving 65,000 Medicaid-enrolled children aged 0 to 5 years old	Of 7,817 children due for developmental screening, 7,138 (91.3%) were screened	Of 2,930 children due for autism screening 2,118 (72.3%) were screened
	Of the 918 children found at risk, 556 (60.6%) were referred for additional services or further assessment.	Of the 400 children found at-risk, 75 (18.8%) were referred for additional services or further assessment

Source: Smart Start Chart Audits

Conclusions

Developmental screening for children aged 0-5 years has reached a level of reliability in North Carolina primary care practices to show that the process has become a routine part of well-child care. This identifies North Carolina as a leader among all the states in developmental screening. Additionally, ABCD Coordinators, who engaged with practices to look at the process in more detail, discovered a need for primary care practices to have a reliable system in place to assure that positive screens result in a referral, and to link families to the array of early intervention resources. Therefore, assistance with the referral process, referral tracking, and obtaining feedback is an ongoing focus of ABCD Coordinator and practice work. This practice experience supported another major achievement of ABCD: multi-stakeholder consensus around a statewide referral form, two-way release, and feedback form in 2015.

Data Sources

CCNC Quality Improvement data, Smart Start chart audit data, Medicaid billing data and the National Survey of Children's Health (NSCH).

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