

PART C – CONCLUSION

Investment and innovation can improve the state of children’s health and address the trends and emerging health care issues facing many children today including obesity, chronic disease, and mental health conditions.

Practical approaches include:

- New models of care offer considerable promise, such as group models to incentivize and provide prenatal care, community-based behavioral interventions to target obesity, and telemedicine models to extend needed mental health services. Mobile health technologies, such as smartphone apps and exergaming devices, offer opportunities to educate and engage children, their families, and pregnant women in managing chronic conditions, reducing obesity, and ensuring healthy pregnancies.
- Advances in data and analytics linked to electronic health records can help to target timely interventions for children with chronic care needs, enable earlier diagnosis of conditions, identify appropriate use of psychotropic medications, and manage high-risk pregnancies. Improved outcomes research efforts can help to build an evidence base of treatments that work for children and get those into the hands of practitioners.
- More broadly, greater use of care coordination can drive improvements in the quality and availability of primary care for children, improve communication among providers, and avert avoidable visits to the hospital. Incentives for greater use of non-physician providers and primary and specialty collaboration can address gaps in care for children, particularly for those with mental health conditions.

Putting those initiatives into action will require a concerted effort, involving a range of public and private stakeholders. State Medicaid and CHIP programs will be central to those efforts because of their important role in covering children; they can sponsor some of the innovative approaches described in this working paper. Changes to traditional payment systems, regulations, and practices will be necessary, however, to advance initiatives in public programs. Employer health plan sponsors, payers, and providers also have opportunities to employ those care models, incentives and technologies. Public health and community-based organizations can inform these efforts with their experiences addressing behavioral, environmental, social, and substance abuse problems for children. Finally, the scientific and research community can continue to advance understanding of children’s health, and find cures and new treatments to help ensure a healthy passage to adulthood.

Practical opportunities for improving child health

Challenges	Current approaches include:	Future opportunities include:
<p>Healthy pregnancy</p> <p>12 percent of births are preterm and can lead to adverse birth outcomes; costs for children in the first year of life are four to six times the average for all children, depending on source of insurance</p>	<ul style="list-style-type: none"> • Greater use of prenatal care reduces preterm births and improves outcomes, community-based approaches can facilitate services and programs • Case management by Medicaid managed care and analytic tools improve outcomes of high-risk pregnancies 	<ul style="list-style-type: none"> • Group prenatal care model offer opportunity to engage women in prenatal care, improve health • Mobile and online tools for pregnant women encourage healthy behaviors and prenatal care visits
<p>Childhood obesity</p> <p>1 in 3 children in the United States is overweight or obese</p>	<ul style="list-style-type: none"> • Home and school-based obesity interventions focus on health eating and physical activity • Family engagement strategies to promote healthy eating, physical activity • Primary care physicians prompt families to enroll their children in weight management programs 	<ul style="list-style-type: none"> • Exergames and mobile technologies can encourage and increase physical activity in boys and girls • New community-based behavioral health interventions, such as JOIN for ME, can produce clinically meaningful reductions in weight
<p>Chronic health conditions in children</p> <p>Approximately 25 percent of children have one or more chronic conditions; A growing proportion of children have asthma, type 2 diabetes, hypertension, and high cholesterol. Managing those conditions and other complex illnesses presents challenges for children and families</p>	<ul style="list-style-type: none"> • Education programs help children and their families follow treatment plans and manage daily care, but requires planning • Coordinated care plans, such as Medicaid managed care organizations, provide an effective platform for service delivery • Family engagement in care planning for young children effective; harder for adolescents • Transitions of care programs designed for children help provide self-management skills, but challenging to implement 	<ul style="list-style-type: none"> • Apps and devices can help children manage conditions, such as diabetes and asthma • Multimedia education, gamification, and social networks help drive children’s engagement and participation in their own self-care
<p>Children’s mental health</p> <p>Approximately 20 percent of children have a mental health condition, with increases in prevalence and diagnoses; limited use of early intervention services, providers lack resources and have difficulties with referrals, and some inappropriate use of certain prescription drugs</p>	<ul style="list-style-type: none"> • Schools, other settings, such as nonprofit clinics, provide early detection and prevention; • Medicaid managed care organizations help states integrate mental health with medical services; States may build relationships with community-based providers. • Support for primary care providers in assessing and treating mental health conditions and training on evidence-based child mental health care. 	<ul style="list-style-type: none"> • Telemedicine technology can help provide access to services • Resources for physicians to help determine effective treatment options which depend upon use of mental health drugs: pharmacy analytics and telephonic outreach
<p>Care coordination for children</p> <p>Lack of coordination of care for children; leads to avoidable ER visits and hospitalizations; difficulties coordinating care for children with multiple providers and complex conditions</p>	<ul style="list-style-type: none"> • Coordinated care plans (including Medicaid health plans) and primary care medical homes facilitate communication between providers, help to establish care plans, and offer support programs for families. • Opportunities to increase coordination with Medicaid managed care and primary care medical homes 	<ul style="list-style-type: none"> • Health information technology coordinates across provider settings and prevents medical errors through increased accuracy in reporting and timely, coordinated data capture • Coordinated care to bring tools, financial incentives, and performance data to providers to help them to meet performance goals
<p>Opportunities in research, care delivery, and quality for children</p> <p>Evidence-base needs improvement; delivery models not tailored for children’s specialty needs; Quality gaps exist relating to common acute conditions, adolescent care; regional disparities (South) persist</p>	<ul style="list-style-type: none"> • Organized collaborations with research scientists, data collection, and analysis of interventions. • Some children’s hospitals have care models with capabilities to analyze data, evaluate the performance of clinical areas, and follow up with pediatric patients after discharge to community settings 	<ul style="list-style-type: none"> • Child health research networks for complex conditions that can generate a repository of information for improving the evidence base • New models to encourage integration of specialty and primary care for children, including new care delivery and reimbursement models • Quality initiatives that engage parents and communities, linkages to public health providers