

LOUISIANA  
**Platform**  
for **Children**  
REPORT





## **What is Public Policy and What is its Connection to the Budget?**

The Governor, the Legislature and the Board of Elementary and Secondary Education have the joint responsibility of setting public policy for the children of Louisiana. Public policy for children includes courses of action, regulatory measures, laws, and funding priorities to address their needs.

Ideally, public policy will be a principled guide to address the needs of children and ensure they mature into productive citizens. It should identify a need and direct resources to meet the need in a way that will assure the desired outcome. Good public policy will provide for investments in evidence-based programs that have been shown, through studies, to provide desired results and deliver a real return on investment.

The executive budget is the primary public policy document for the state. Laws and resolutions that identify needs and responses will not be effective if funding is not provided.

As elected officials, the children of Louisiana are your constituents. The future of Louisiana requires elected officials to make children their top priority to guarantee a vibrant Louisiana in the future.

*The term, Evidence-Based Practice (EBP), originated in the medical community in the 1990s. An EBP is the current best practice that has been subjected to strong scientific research and interpreted using a very narrow set of methodological criteria. Since the 1990s, the EBP concept has been adopted in many other fields, including child and family services.*



# LOUISIANA'S CHILDREN

## Physical Health and Development

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Good health is essential in the 21st century for children to become contributing adults in a global society. Children require the attention, encouragement and intervention of parents and qualified care providers from many disciplines to ensure that they develop healthy bodies, minds, emotions and attitudes. Child health policy must address the preventive, health promotion and acute health care needs of infants, children and adolescents to ensure a solid foundation for future growth.

### What About Physical Activity?

The 2012 Louisiana Report Card on Physical Activity and Health for Children and Youth, Pennington Biomedical Research Center, assessed the level of physical activity and sedentary behaviors in Louisiana's children and youth, the level of facilitators and barriers for physical activity, and their related health outcomes. The Report Card provides a comprehensive evaluation of the physical activity levels and the indicators that influence physical activity among children and youth in Louisiana. Louisiana received an overall grade of "D", which indicates that insufficient appropriate physical activity opportunities and programs are available to the majority of Louisiana's children.

### Medical Home

Children require a medical home, an approach to providing comprehensive primary care facilitating sound working relationships among patients, clinicians, medical staff, and families. The medical home offers access to preventive, health-promoting, therapeutic, and rehabilitative medical, mental health, and dental care. Such care should ideally begin prior to conception but no later than during the prenatal period and is best provided through a continuing relationship with a primary health professional and ready access to specialty care as-needed. The medical home not only cares for them when they are ill, but also ensures that developmental milestones

are monitored and appropriate interventions are sought when milestones are not met. Such interventions are most effective and least costly when provided promptly.

### Current Medicaid Coverage Available

- Louisiana Children's Health Insurance Program (LaCHIP) provides health coverage to uninsured children from birth to age 19 whose family income is no more than 200% of the federal poverty level. It is a no-cost health program which pays for hospital care, doctor visits, prescription drugs, shots and more.
- LaCHIP Affordable Plan is a LaCHIP health insurance program for uninsured children in moderate income families whose income is too much to qualify for LaCHIP.
- Opportunity Act Medicaid provides health coverage to uninsured or underinsured children who have disabilities in families with too much income to qualify for LaCHIP.
- Family Opportunity Act Medicaid opens coverage up to children with disabilities in families with a higher income range, allowing families to buy into the Medicaid Program. Through the LaMOMS program pregnant women have access to no-cost health care coverage. Louisiana's Medicaid Purchase Plan (MPP) offers health coverage for people with disabilities who work. Take Charge Plus provides health coverage for family planning and family planning related services.
- Federal Affordable Care Act allows states to expand Medicaid to all adults below 138% of the federal poverty level. Louisiana has chosen not to expand Medicaid at this point. Although this decision does not directly affect children, it does have significant impact as children are healthier when all family members have access to health care. Also, the impact has a negative impact on hospitals and children providing some communities with limited access to emergency care and other hospital services.

## Managed Care Saving the State Money?

In recent years, Louisiana has moved from a fee for service program where the state, through a fiscal intermediary, paid a set fee for each service provided to a child to a managed care model where private, for-profit insurance companies enroll and provide services for children at a fixed monthly fee per child. Under this model, called Bayou Health, children are linked to one of five insurance plans that are to provide all needed health services through their network of providers. Ideally, children should have a medical home with a pediatrician or other physician specially trained to care for children managing their care.

The transition to managed care was done to improve access to care, assure that children receive needed services, and stabilize the state budget process by providing a predictable monthly cost for each enrollee. The Legislative Auditor has found that savings are difficult to calculate because no baseline was established beforehand to use for a comparison with the old fee for service model. He also raised concerns about the data since it comes directly from the health plans.

## Medicaid Requirements for Children

The Medicaid program includes provisions for children to receive Early and Periodic screening, Diagnostic and Treatment (EPSDT) benefits which includes the provision for medical screening. Federal law requires each screen to include five components including:

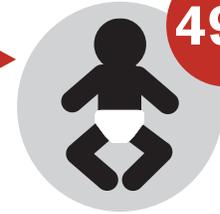
- A comprehensive health and developmental history
- An unclothed physical examination
- Appropriate immunizations
- Laboratory tests
- Health education and anticipatory guidance

47th



Since 1990, infant mortality in LA has decreased by 32% from 11.8 to 8.2 deaths per 1,000 live births. However, despite such improvement **LA still ranks 47th in infant mortality** among the states.  
KIDS Count

In the past 20 years, low birth weight increased by 15% from 9.4% to 10.8% of all births. **Louisiana ranks 49th for low birth weight infants.** KIDS Count



49th



70%

**Medicaid pays for nearly 70% (43,175) of all births** in Louisiana.  
Kaiser Family Foundation

**731,114 children are enrolled in Medicaid, representing 52% of the total Medicaid population.**

LA DHH



52%

## Dental Services

The Medicaid program has recently contracted with a national provider to manage all dental services for children. Again, children are linked to local dentists for their care. In recent years, mobile dentistry programs have proven effective in reaching young children with preventive and restorative dental services. However, the national provider does not credential mobile dentists and this promising service has been lost.

## Integrated Mental Health Services

Children's mental health services are extremely limited in Louisiana, especially for very young children. This issue is further explored in the Social/Emotional section but consideration must be given to integrating children's mental health services into the medical home.

## Policy Recommendations – Physical Health and Development

To ensure children have access to needed health services, the following steps must be taken:

- Create accountability measures, other than health plan reporting, to ensure children receive access to needed acute care and appropriate immunizations

and to determine that required developmental screens (EPSDT) are performed as required.

- Require that health plans (medical and dental) demonstrate that they have provided a minimum of one preventive encounter per year for each child assigned to them.
- Establish a reimbursement floor for physicians that is no less than 100% of Medicare in order to ensure adequate participation in the program.
- Reinstate mobile dentistry to reach chronically underserved children and establish accountability measures in place to ensure children are actually being treated and not just assigned to a dental provider.
- Assure that there is aggressive outreach to ensure all eligible children are enrolled and assigned a medical home.
- Provide health literacy programs to ensure families understand how to use the system.
- Incorporate parenting education into the medical home.
- Adopt a single drug formulary by the Bayou Health plans to maximize savings.

## Policy Recommendations – Safe Environment for Children

In addition to health benefits provided for children through Medicaid, Louisiana must take steps to provide access to needed care and to ensure children live in safe environments. To achieve that, the state must carefully invest in programs, which are evidence-based and cost-effective, including the following:

- Expand the Nurse Family Partnership program providing licensed trained nurses to work with high-risk first-time mothers throughout pregnancy and continue to follow the children until age 2 while ensuring all eligible families have the option to receive this service.
- Expand school-based clinics as a proven way to reach underserved children, address mental and physical health needs, and keep them in school.
- Develop programs addressing childhood obesity to prevent the onset of adult chronic diseases.
- Ensure that parenting education curricula include emphasis on developmental issues for children.
- Provide preventive services for pregnant women including smoking cessation, substance abuse

screening/treatment, focus on appropriate weight gain, and dental care to address low birth weight related to gum disease.

- Encourage efforts to assure that all new mothers have information about the benefits of breastfeeding and the support needed to be successful.
- Require the full range of newborn screening in order to identify and intervene appropriately as required.
- Institute disease management programs tied asthma and juvenile diabetes in order to reduce hospitalization.
- Require daily physical education for children in school.
- Address all barriers to childhood immunizations with education about the benefits.
- Enforce existing vehicle restraint laws and bicycle helmet laws for children.
- Promote educational programs to prevent sudden infant death and suffocation including safe sleep positioning.

A new report on the Nurse-Family Partnership® (NFP) found that NFP offers significant benefits to the families it serves and significant cost savings to society and government funders. The average cost per family, of \$9,337, results in:

