



Oklahoma Uses an Innovative Funding Opportunity to Promote Healthy Child Development through the Reach Out and Read Program

Megan Lent

Introduction

In 2018, Oklahoma took action to increase well-child visits and developmental screening during children's first three years of life through a Health Services Initiative (HSI), which uses Children's Health Insurance Program (CHIP) administrative dollars to fund a range of initiatives to support children's health beyond insurance coverage. Oklahoma has a long history of promoting well-child visits, developmental screening, and linking children to support services.¹ Currently, Oklahoma provides incentives to providers for well-child visits and screenings and encourages families to read together, one of the most important ways parents can support children's healthy development.²

Developmental screening can lead to early intervention during a child's first years – a critical time in children's development.^{3,4} The American Academy of Pediatrics' (AAP) Bright Futures periodicity schedule recommends developmental screening using standardized tools during 9-month, 18-month, and 2 ½-year well-child visits, as well as at other intervals when concerns are identified.⁵

According to a report on Oklahoma's Medicaid program quality of care, in 2016 only 16.4 percent of children with Medicaid coverage received a developmental screening during their first three years of life. In addition, only 56.5 percent of Oklahoma children ages 3 to 6 with Medicaid coverage received well-child visits, compared to the national average for Medicaid Health Maintenance Organizations (HMOs) of 72.2 percent.^{6,7} Oklahoma's HSI takes action to improve these rates by tapping into an innovative funding opportunity and partnering with both local and national organizations to build on its progress to prioritize healthy child development.



Oklahoma's solutions:

- Tap into CHIP's **Health Services Initiative** funding, and
- Partner with nonprofit organizations, including **Reach Out and Read** and the **University of Oklahoma College of Medicine, Department of Pediatrics**.

Program Overview

In November 2018, the Oklahoma Health Care Authority began implementing an innovative program to increase well-child visits and developmental screening by capitalizing on the nationally-recognized [Reach Out and Read](#) program.⁸ Reach Out and Read is an evidence-based, early intervention program that trains physicians to support the positive, language-rich parent/caregiver-child interactions that foster healthy brain development during the critical early years of life. Children receive a developmentally appropriate book during well-child visits – up to 10 books – and providers prescribe reading aloud to families.⁹ The AAP supports integration of literacy promotion, such as the Reach Out and Read program, as an essential component of pediatric primary care.¹⁰ The program is designed to both encourage families to attend well-child visits and providers to administer developmental screenings.

Under Oklahoma’s initiative, Medicaid providers are recruited to participate in Reach Out and Read, provided with training, and offered program support and assistance to improve the quality of the well-child visit. Oklahoma encourages developmental screenings during well-child visits by supplying providers with [Ages & Stages Questionnaires](#) (ASQ) in English and Spanish¹¹ and providing training on how to use these screening tools.¹² Participating providers are trained to incorporate an age appropriate, culturally sensitive new book during the exam, which the child keeps. The book is used by the provider as a tool for assessment and anticipatory guidance. Providers also use the book to survey the child’s gross and fine motor skills, cognitive and speech milestones, and to observe parent/child interactions. Providers model reading the book to the child and emphasize the importance of language and development skills to parents.¹³ The initiative is implemented in partnership with the University of Oklahoma College of Medicine’s Department of Pediatrics.¹⁴ The Oklahoma Health Care Authority has an interagency agreement with the University of Oklahoma, and a university pediatrician serves as the lead. The university contracts with Reach Out and Read as a vendor and provides regular program reports to the state. State officials meet regularly with both entities to get program updates and monitor progress.

The provider outreach and training are funded through an HSI,¹⁵ which allows Oklahoma to use a portion of its unused CHIP administrative dollars to fund the program. The program’s estimated budget for federal fiscal year 2019 is \$101,400. The federal share was estimated at \$98,024 and the state share at \$3,377.¹⁶ The University of Oklahoma provided the state match.¹⁷

States use an HSI to advance public health goals and provide direct services.

- The initiative must improve low-income children’s health up to age 18 who are eligible for CHIP and/or Medicaid, although HSIs can serve children regardless of income in addition to low-income children.
 - As of January 2019, 73 HSIs had been approved in 26 states.
- HSIs are funded using CHIP administrative funds. After funding benefits and administrative costs in their CHIP programs, state agencies that administer CHIP can use any remaining funds within the 10 percent cap on administrative expenditures to develop an HSI.
 - Expenditures for approved HSIs are matched by the federal government at the applicable CHIP matching rate as long as the state’s administrative and HSI costs stay within the 10 percent limit.
 - The funds must not supplant or match CHIP federal funds with other federal funds or allow other federal funds to supplant or match CHIP federal funds. States should work collaboratively with the Centers for Medicare & Medicaid (CMS) as they design their initiatives to avoid this complex issue.
- Learn more about HSIs that states are implementing with NASHP’s [interactive tool](#).
- For more HSI information, see the CMS [January 2017 FAQs](#).

To date, Oklahoma has achieved these outcomes for the collaborative initiative:¹⁸

- Using the Reach Out and Read model, Oklahoma has trained 124 providers and staff at provider sites;
- During a one-hour provider training workshop hosted by the Medicaid agency and presented by the University of Oklahoma and Reach Out and Read, 74 health care providers and staff received information on Reach Out and Read and developmental screening;
- Nine new Reach Out and Read sites were established; and
- ASQ kits are being distributed to providers.

Oklahoma's Developmental Screening Reimbursement and Tools:

Oklahoma currently reimburses Current Procedural Terminology code 96110 at \$8.31 and recommends that providers use screening tools including the Ages & Stages Questionnaire, Parents' Evaluation of Developmental Status, and others recommended by the AAP. For more information about Medicaid developmental screening policies by state, visit [NASHP's 50-state chart](#).

Oklahoma will be measuring increases in the rate of developmental screenings billed to Medicaid. However, state officials hope providers will adopt and use these practices with all young patients in their practices and increase standardized developmental screening for all young children regardless of insurance coverage.

Conclusion

Oklahoma is prioritizing young children's healthy development by tapping into the nationally-recognized program Reach Out and Read and engaging local partners, such as the University of Oklahoma, demonstrating that these efforts do not have to come at a large cost to the state's Medicaid program. Oklahoma's approach to leveraging CHIP administrative funds through an HSI can serve as a model for other states working to prioritize the health of low-income children.

To learn more about states' approaches to developmental screening under Medicaid, visit the National Academy for State Health Policy's [Healthy Child Development State Resource Center](#) and view interactive maps highlighting various states' use of screening tools, reimbursement rates, measurement reporting and incentives, and policies related to referral, care coordination, outreach, and training.

Notes

1. "Oklahoma," National Academy for State Health Policy. Accessed June 20, 2019. <https://nashp.org/oklahoma/>.
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7. "Reach Out and Read coming to more SoonerCare members," Oklahoma Health Care Authority news release. Accessed June 20, 2019. <http://www.okhca.org/about.aspx?id=22619>.
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9. "Start a Program," Reach Out & Read. Accessed June 20, 2019. <http://www.reachoutandread.org/resource-center/medical-providers/start-a-program/>.
10. Council on Early Childhood, High PC, Klass P. Literacy promotion: an essential component of primary care pediatric practice. *Pediatrics*. 2014;134(2):404-9. <https://pediatrics.aappublications.org/content/134/2/404>.
11. "ASQ Ages & Stages Questionnaires," Brookes Publishing. Accessed June 20, 2019. <https://agesandstages.com/>.
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13. "Archived Proposed Policy Changes, OK TXXI SPA 18-0016 Health Service Initiative - Reach Out and Read," Oklahoma Health Care Authority. Accessed June 20, 2019. <http://www.okhca.org/providers.aspx?id=12395>.
14. "Reach Out and Read coming to more SoonerCare members," Oklahoma Health Care Authority news release. Accessed June 20, 2019. <http://www.okhca.org/about.aspx?id=22619>.
15. HSI funds are not used for the books.
16. <http://okhca.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=22239&libID=21221>.
17. "Archived Proposed Policy Changes, OK TXXI SPA 18-0016 Health Service Initiative - Reach Out and Read," Oklahoma Health Care Authority. Accessed June 20, 2019. <http://www.okhca.org/providers.aspx?id=12395>.
18. Data provided by Oklahoma Health Care Authority on June 28, 2019.

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