

Comments: Six Years of ABCD
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Illinois has focused considerable energy on improving and linking its efforts on behalf of young children. Illinois has a strong state policy framework, and a strong leadership group built on solid relationships among advocates and state officials. Policy and leadership efforts focus on the importance of promoting healthy early childhood programs. Illinois' success is based on public/private partnerships, strong advocacy, and State agencies working together to assure the service delivery system meets the needs of young children.

The Illinois Department of Healthcare and Family Services (HFS), the state's Medicaid agency, participated in ABCD II and III. Throughout Illinois' involvement in ABCD we have created systems changes to improve objective developmental screening rates through public/private partnerships and to improve the communication system between primary care providers and Early Intervention offices. We improved objective developmental screening rates through Web-based training and other technical assistance activities for primary care providers (PCP), we developed a Maintenance of Certification part 4 quality improvement initiative for screening and referring at-risk children, we improved the referral communication loop between PCPs and Early Intervention offices using standardized forms that are HIPAA and FERPA compliant, and we developed state agency policies to support the referral system and use of consent forms to assure consistent information exchange.

Provider Training and Quality Improvement

Through a public/private partnership, Illinois implemented the Enhancing Developmentally Oriented Primary Care (EDOPC) project. The EDOPC project is a collaborative partnership between the Illinois Chapter of the American Academy of Pediatrics (ICAAP), the Advocate Health System's Healthy Steps for Young Children Program, the Illinois Academy of Family Physicians (IAFP) and the Ounce of Prevention Fund.

The EDOPC project provides training to primary care providers and pediatric clinics on developmental and social emotional screening using validated screening and evaluation tools with material and training philosophy based on evidence-based programs. The [EDOPC Website](#) contains up-to-date information on child development and mental health issues, including screening, referral and coding/billing for screenings. EDOPC offers online and office-based training in developmental screening, social/emotional screening, perinatal maternal depression screening, domestic violence screening, and care coordination. The online training offers CME credit.

Through the ABCD project, a curriculum was developed for pediatricians engaged in the pilot sites. This curriculum was submitted and obtained approval from the American Board of Pediatrics to approve Maintenance of Certification (MOC) part 4 credit for pediatricians who participate. The MOC4 objective developmental screening quality improvement initiative was broadly disseminated to pediatricians by ICAAP.

A care coordination protocol for providers was developed to improve the communication process between referral sources and Early Intervention programs. The toolkit is designed to help users initiate a referral to Early Intervention services for children with suspected developmental delay, and to receive information back from Early Intervention about the outcome of the referral. The provider toolkit was

developed by ICAAP in collaboration with the Illinois Department of Human Services and the Illinois Department of Healthcare and Family Services.

Systems and Policy Changes

Systems changes included standardizing the referral communication and feedback process and assuring that proper consent is obtained for the information exchange. The communication process between the primary care provider and Early Intervention systems was improved by use of standardizing referral and referral feedback forms. Primary care providers use the referral form to send basic information to the Early Intervention office for children with suspected developmental delay. The Early Intervention office uses a standardized feedback form to share information about the outcome of the referral to the referral source.

Through ABCD, Illinois' Medicaid and Human Services agencies collaborated to craft the consent language and to change policies to support consent form use. The resulting consent language is FERPA and HIPAA compliant. The standardized referral form used by primary care providers and community-based organization includes consent language that permits Early Intervention to share service eligibility outcome information with the referral source. When a community-based organization originates the referral a section of the standardized referral form can be completed to identify the child's primary care provider. This assures that, even when the child's medical provider does not originate the referral, when consent is obtained Early Intervention can share service eligibility outcome information with the child's primary care provider. Similarly, the consent form used by Early Intervention agencies includes wording that parallels the standardized referral form consent language so that regardless of which consent is signed the same entities are involved in the information exchange, as long as they are identified and consent is provided by the parent/guardian.

Policy changes support the use of the consent form within Early Intervention agencies. The Illinois Department of Human Services incorporated the consent language in their updated Early Intervention procedure manual (2013). The Early Intervention program consent form to collect, store & utilize personally identifiable information includes a paragraph specifically addressing children on public insurance that permits Early Intervention to share information with the Medicaid agency for the purpose of billing, care coordination and analysis.

The revised procedure manual also includes a section requiring Early Intervention offices to request that families sign the consent to share information when the child has an identified PCP. This means that, with consent, the information collected by Early Intervention can be shared with the child's medical provider even if the child's medical provider did not originate the referral.

On-going Activities

Through ABCD, the Illinois Medicaid and Human Services agencies are developing an electronic data exchange to automate the Early Intervention referral and feedback communication loop. This electronic system will replicate the data sharing that currently occurs through the standardized referral and referral forms that are faxed between referral sources. This automated system will create a more consistent feedback process since Early Intervention is the nexus of the system.

ABCD care coordination activities are spreading to other populations. The standardized referral form is in use by agencies serving the homeless; childcare workers and home visitors are using the forms; and agencies providing mental health and substance abuse services can use the forms.